Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main

Document Page 1 of 59

| Fill in this information to identify your case: |   |                                      |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the :        |   |                                      |
| NORTHERN District of ILLINOIS (State)           |   |                                      |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

## **Official Form 101**

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Identify Yourself   |                            |   |
|----|---|----------------------------|---|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name  |                            |   |
|    | Write the name that is on your  | Oscar                      |   |
|    | government-issued picture identification (for example, your driver's license or | First name                 | First name                                    |
|    | passport).  | Middle name                | Middle name                                   |
|    | Bring your picture  | Vega                       |   |
|    | identification to your meeting with the trustee.                                | Last name                  | Last name                                     |
|    |   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |                            |   |
|    | have used in the last 8   | First name                 | First name                                    |
|    | years   |                            |   |
|    | Include your married or maiden names.   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
|    |   |                            |   |
|    |   | First name                 | First name                                    |
|    |   | NO. 10                     | NO. 10  |
|    |   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
|    |   |                            |   |
| 3. | Only the last 4 digits of your Social Security                                  | xxx - xx - <u>9854</u>     | XXX - XX                                      |
|    | number or federal<br>Individual Taxpayer  | OR                         | OR  |
|    | Identification number   |                            |   |
|    |   | 9xx - xx                   | 9xx - xx                                      |
|    |   |                            |   |

Document Vega Entered 08/14/18 12:10:02 Desc N Page 2 of 59

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |  |
|----|--|---|---|--|--|--|
| 4. | Any business names<br>and Employer<br>Identification Numbers | I have not used any business names or EINs.   | I have not used any business names or EINs.   |  |  |  |
|    | (EIN) you have used in<br>the last 8 years                   | Business name   | Business name   |  |  |  |
|    | Include trade names and doing business as names              | Business name   | Business name   |  |  |  |
|    |  | EIN   | EIN   |  |  |  |
|    |  | EIN   | EIN   |  |  |  |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:   |  |  |  |
|    |  | 822 Roberts Rd  | Number Street   |  |  |  |
|    |  | Unit  | Number Sueet  |  |  |  |
|    |  | Sandwich IL 60548   |   |  |  |  |
|    |  | Sandwich IL 60548  City State ZIP Code  | City State ZIP Code   |  |  |  |
|    |  | DEKALB  |   |  |  |  |
|    |  | County  | County  |  |  |  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |  |  |  |
|    |  | Number Street   | Number Street   |  |  |  |
|    |  | P.O. Box  | P.O. Box  |  |  |  |
|    |  | City State ZIP Code   | City State ZIP Code   |  |  |  |
| 6. | Why you are choosing   | Check one:  | Check one:  |  |  |  |
|    | this district to file for bankruptcy.                        | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                            |  |  |  |
|    |  | have another reason. Explain. (See 28 U.S.C. § 1408   | ☐ I have another reason. Explain.<br>(See 28 U.S.C. § 1408  |  |  |  |
|    |  |   |   |  |  |  |
|    |  |   |   |  |  |  |
|    |  |   |   |  |  |  |
|    |  |   |   |  |  |  |

Oscar

Debtor 1

Last Name

Oscar Document Vega

Debtor 1

Page 3 of 59

Case Number (if known)

| Pa  | Tell the Court About You   | r Bankruptcy   | Case   |   |                      |   |   |  |  |
|-----|--|--|--|---|----------------------|---|---|--|--|
| 7.  | The chapter of the<br>Bankruptcy Code you                                |  | •  | •   |                      | equired by 11 U.S.C. § 342(b) for Individuals page 1 and check the appropriate box. |   |  |  |
|     | are choosing to file under   | ■ Chap   | ter 7  |   |                      |   |   |  |  |
|     | under  | ☐ Chapter 11   |  |   |                      |   |   |  |  |
|     |  | ☐ Chap   | ter 12   |   |                      |   |   |  |  |
|     |  | ☐ Chap   | ter 13   |   |                      |   |   |  |  |
| 8.  | How you will pay the fee   | local<br>yours<br>subm   | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. |   |                      |   |   |  |  |
|     |  |  |  |   | -                    | ose this option, sign and attach the in Installments (Official Form 103A).          |   |  |  |
|     |  | I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition. |  |   |                      |   |   |  |  |
| 9.  | Have you filed for bankruptcy within the                                 | ■ No   |  |   |                      |   |   |  |  |
|     | last 8 years?  | ☐ Yes.   | District   | None  | When                 | Case Number   |   |  |  |
|     |  |  | District   | None  | When                 | Case Number   |   |  |  |
|     |  |  |  |   |                      | MM / DD / YYYY  |   |  |  |
|     |  |  | District   |   | When                 | Case Number   |   |  |  |
|     |  |  |  |   |                      | MM / DD / YYYY  |   |  |  |
| 10. | Are any bankruptcy<br>cases pending or being                             | ■ No   |  |   |                      |   |   |  |  |
|     | filed by a spouse who is   | ☐ Yes.   |  |   |                      | Relationship to you   |   |  |  |
|     | not filing this case with you, or by a business parter, or by affiliate? |  | District   |   | When                 | Case Number, if known   |   |  |  |
|     |  |  |  |   |                      | Relationship to you   |   |  |  |
|     |  |  | District   |   | When                 | Case Number, if known   |   |  |  |
|     |  |  |  |   |                      |   | _ |  |  |
| 11. | Do you rent your residence?  | ☐ No.<br>■ Yes.  | Go to li<br>Has yo   |   | I an eviction judgme | nt against you?   |   |  |  |
|     |  |  | ΠY   | lo. Go to line 12.<br>es. Fill out <i>Initial St</i> anis bankruptcy petition |                      | viction Judgment Against You (Form 101A) and file it with                           |   |  |  |

| Debtor 1                         | Case 18-8172 Oscar First Name  | 8 Doc 1  | Filed 08/14/18<br>Document<br>Vega  | Entered 08/14/18 12:10:0<br>Page 4 of 59<br>Case Number (if known)                                 |  |
|----------------------------------|--|--|---|--|--|
| Part 3                           | Report About Any Busine  | esses You Own as   | a Sole Proprietor   |  |  |
| ob<br>A<br>boin<br>se<br>a<br>Li | are you a sole proprietor f any full- or part-time usiness? sole proprietorship is a usiness you operate as an idividual, and is not a eparate legal entity such as corporation, partnerhsip, or LC. you have more than one ole proprietorship, use a eparate sheed and attach it  | Yes. Na  | to Part 4. me and location of busines me of business, if any mber Street  | s  |  |
|                                  | this petition.   | ]<br> <br>   | eck the appropriate box to  Health Care Business (a  Single Asset Real Estate  Stockbroker (as defined  | describe your business: as defined in 11 U.S.C. § 101(27A)) e (as defined in 11 U.S.C. § 101(51B)) | tate Zip Code  |
| C<br>B<br>a<br>d<br>F            | the you filing under chapter 11 of the chapter 11 of the chapter 12 of the chapter 13 of the chapter 14 of the chapter 15 of the chapter 1 | appropriate de balance sheet, documents do  No. I am the E | padlines. If you indicate that, statement of operations, of not exist, follow the process and filing under Chapter 11 filing under Chapter 11, but tankruptcy Code. | try  | tach your most recent turn or if any of these to the definition in |
| p<br>a<br>o<br>ir<br>p<br>O      | Report if You Own or Have any roperty that poses or is lleged to pose a threat f imminent and indentifiable hazard to ublic health or safety? Or do you own any roperty that needs   | No.  | Property or Any Property The state of the hazard?   | at Needs Immediate Attention   |  |

immediate attention?
For example, do you own
perishable goods, or livestock
that must be fed, or a building
that needs urgent repairs?

| What is the hazard?       |             |               |               |          |
|---------------------------|-------------|---------------|---------------|----------|
| If immediate attention is | needed, why | is it needed? |               |          |
| Where is the property?    | Number      | Street        |               |          |
|                           | City        |               | <br><br>State | ZIP Code |

Entered 08/14/18 12:10:02 Desc Main Case 18-81728 Doc 1 Filed 08/14/18

Document

Page 5 of 59

Case Number (if known)

Debtor 1

Oscar

Middle Name

Part 5: **Explain Your Efforts to** 

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| Receive a Briefing About Credit Counseling  |   |
|---|---|
| About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
| You must check one:   | You must check one:   |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  | ☐I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.   |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  |
| I received a briefing from an approved credit<br>counseling agency within the 180 days before I<br>filed this bankruptcy petition, but I do not have a<br>certificate of completion.  | ☐I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.  |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of:   | I am not required to receive a briefing about credit counseling because of:   |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  |

Disability.

Disability.

My physical disability causes me

to be unable to participate in a

briefing in person, by phone, or

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

My physical disability causes me

to be unable to participate in a

briefing in person, by phone, or

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

Document Vega Entered 08/14/18 12:10:02 Des Page 6 of 59

Case Number (if known)

|     | First Name  | Middle Name   | Last Name  |                                       |   |  |
|-----|---|---|--|---------------------------------------|---|--|
| Pai | t 6: Answer These Question  | ns for Reporting Purposes   |  |                                       |   |  |
| 16. | What kind of debts do you have?   | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17. |  |                                       |   |  |
|     |   | •   |  | •                                     |   |  |
|     |   | 16c. State the type of de   | ebts you owe that are not consumer   | debts or business debts.              |   |  |
| 17. | Are you filing under<br>Chapter 7?  | _   | g under Chapter 7. Go to line 18.  |                                       |   |  |
|     | Do you estimate that after<br>any exempt property is<br>excluded and<br>administrative expenses<br>are paid that funds will be<br>available for distribution<br>to unsecured creditors? |   | ider Chapter 7. Do you estimate that e expenses are paid that funds will b   |                                       |   |  |
| 18. | How many creditors do you estimate that you owe?  | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999   | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000   | □ 50,                                 | 001-50,000<br>001-100,000<br>re than 100,000  |  |
| 19. | How much do you estimate your assets to be worth?   | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million   | \$50,000,001-\$  | 50 million ☐\$1,<br>100 million ☐\$10 | 00,000,001-\$1 billion<br>000,000,001-\$10 billion<br>0,000,000,001-\$50 billion<br>ore than \$50 billion |  |
| 20. | How much do you estimate your liabilities to be?  | □ \$0-\$50,000 ■ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million   | 50,000,001-\$  | 50 million ☐\$1,<br>100 million ☐\$10 | 00,000,001-\$1 billion<br>000,000,001-\$10 billion<br>0,000,000,001-\$50 billion<br>re than \$50 billion  |  |
| Pa  | Tt 7: Sign Below  |   |  | _                                     |   |  |
| For | you   | correct.  If I have chosen to file ur   | tition, and I declare under penalty of nder Chapter 7, I am aware that I may Code. I understand the relief availab | ay proceed, if eligible, under Chapt  | ter 7, 11,12, or 13   |  |
|     |   | If no attorney represents   | s me and I did not pay or agree to pay<br>otained and read the notice required I                                   |                                       | to help me fill out   |  |
|     |   | I request relief in accorda   | lance with the chapter of title 11, Unit   | ed States Code, specified in this p   | petition.   |  |
|     |   | -   | alse statement, concealing property, can result in fines up to \$250,000, or , 1519, and 3571.                     |                                       |   |  |
|     |   | ★ Is/ Oscar Vega Signature of Debto   |  | Signature of Debtor                   | 2   |  |
|     |   | Executed on08/  | /13/2018<br>MM / DD / YYYY   | Executed onMM                         | // / DD / YYYY  |  |

Oscar

Debtor 1

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 7 of 59

| Debtor 1 | Oscar | ı | Vega | Case Number (if known) |
|----------|-------|---|------|------------------------|
|          |       |   |      |                        |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Alex Wilson                | Date    | Date:   | 08/14/2018 |
|----------------------------------|---------|---------|------------|
| Signature of Attorney for Debtor | Duto    | MM / DI | D / YYYY   |
| Alex Wilson                      |         |         |            |
| Printed name                     |         |         |            |
| Geraci Law L.L.C.                |         |         |            |
| Firm name                        |         |         |            |
| 55 E. Monroe St., #3400          |         |         |            |
|                                  |         |         |            |
| Number Street                    |         |         |            |
| Number Street                    |         |         |            |
| Number Street Chicago            | IL      | 6060    | 3          |
|                                  | ILState |         | 3<br>Code  |
| Chicago                          | State   | ZIP     |            |
| Chicago                          | State   | ZIP     | Code       |

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 8 of 59

|                           |                     |                                      | осынын              | 1 010 0 0 |
|---------------------------|---------------------|--------------------------------------|---------------------|-----------|
| Fill in this in           | formation to ider   | ntify your case:                     |                     |           |
| Debtor 1                  | Oscar               |                                      | Vega                |           |
|                           | First Name          | Middle Name                          | Last Name           |           |
| Debtor 2                  |                     |                                      |                     |           |
| (Spouse, if filing)       | First Name          | Middle Name                          | Last Name           |           |
| United States             | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of | ILLINOIS<br>(State) |           |
| Case Number<br>(If known) | ·                   |                                      |                     |           |
|                           |                     |                                      |                     |           |

## Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: | Summarize Your Assets  |                                      |
|---------|--|--------------------------------------|
|         |  | Your assets<br>Value of what you own |
|         | ule A/B: Property (Official Form 106A/B) by line 55, Total real estate, from Schedule A/B  | <u> </u>                             |
| 1b. Cop | by line 62, Total personal property, from Schedule A/B   | \$ 9,325                             |
| 1c. Cop | by line 63, Total of all property on <i>Schedule A/B</i>   | \$ 9,325                             |
| Part 2: | Summarize Your Liabilities   |                                      |
| rart 2: |  | Your liabilities<br>Amount you owe   |
|         | ole D: Creditors Who Have Claims Secured by Property (Official Form 106D) by the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$16,019                             |
| 3а. Сор | of the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$0<br>\$64,473                      |
| 3b. Cop | by the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | Ψ04,470                              |
|         | _  |                                      |
| Part 3: | Summarize Your Liabilities   |                                      |
|         | tle I: Your Income (Official Form 106I) your combined monthly income from line 12 of Schedule I  | \$2,432.17                           |
|         | rour monthly expenses (Official Form 106J)  Your monthly expenses from line 22c of Schedule J  | \$2,419.00                           |

Document Oscar Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name

| Pa | Answer Thes   | e Questions for Administrative and Statistical Records   |              |             |  |  |
|----|---|--|--------------|-------------|--|--|
| 6. | Are you filing for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes   |  |              |             |  |  |
| 7. | <ul> <li>What kind of debt do you have?</li> <li>Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.</li> <li>Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> </ul> |  |              |             |  |  |
| 8. |   | f Your Current Monthly Income: Copy your total current monthly income from Of<br>OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | ficial       | \$ 3,210.94 |  |  |
| 9. |   |  |              |             |  |  |
|    | From Part 4 of Scheo  | ule E/F, copy the following:   |              |             |  |  |
|    | 9a. Domestic support of   | bligations (Copy line 6a.)   | \$_0.00      |             |  |  |
|    | 9b. Taxes and certain of  | other debts you owe the government. (Copy line 6b.)  | \$ 0.00      |             |  |  |
|    | 9c. Claims for death or   | personal injury while you were intoxicated. (Copy line 6c.)  | \$_0.00      |             |  |  |
|    | 9d. Student loans. (Cop   | by line 6f.)   | \$_20,497.00 |             |  |  |
|    | 9e. Obligations arising priority claims. (Copy li   | out of a separation agreement or divorce that you did not report as ne 6g.)  | \$_0.00      |             |  |  |
|    | 9f. Debts to pension of   | profit-sharing plans, and other similar debts. (Copy line 6h.)   | \$_0.00      |             |  |  |
|    | 9g. <b>Total.</b> Add lines 9a  | through 9f.  | \$_20,497.00 |             |  |  |

|   | Caso 19   | 2 91729 Doc 1   | Eilad 09/1//19   | Entered 08/14/18 12                   | 2·10·02 D  | esc M                    | ain  |                        |
|---|---|---|--|---------------------------------------|--|--------------------------|--|------------------------|
| Fill in this in   |   | ntify your case and this fili   |  | 0 of 59                               | L.10.02 D  | C30 IVI                  | ani  |                        |
| Debtor 1  | Oscar   |   | Vega   |                                       |  |                          |  |                        |
|   | First Name  | Middle Name   | Last Name  |                                       |  |                          |  |                        |
| Debtor 2<br>(Spouse, if filing)                                 | First Name  | Middle Name   | Last Name  |                                       |  |                          |  |                        |
| United States   | Bankruptcy Court fo   | or the : <u>NORTHERN</u> Distric  | ct of <u>ILLINOIS</u>  |                                       |  |                          |  |                        |
| Case Number   |   |   | (State)  |                                       |  | Che                      | eck if this is a   | an                     |
| (If known)  |   |   |  |                                       |  | am                       | ended filing   |                        |
| Official F  | <u>orm 106A</u>   | <u>/B</u>   |  |                                       |  |                          |  |                        |
| Schedul   | e A/B: Pr   | operty  |  |                                       |  |                          |  | 12/15                  |
| esponsible for ages, write you part 1:  01. Do you ow No.  Yes. | supplying correction name and cas  Describe Each Rectorn or have any le  Describe   | ct information. If more spa<br>e number (if known). Answ<br>sidence, Building, Land, or O<br>gal or equitable interest in | ce is needed, attach a separa  | d, or similar property?               |  |                          |  |                        |
| you have at   | tached for Part 1   | . Write that number here .  |  |                                       | >  |                          |  | \$0.00                 |
| Part 2:   | Describe Your Vel   | nicles  |  |                                       |  |                          |  |                        |
| No. Yes.  M  A  C  2  r   | Describe Make: Model: Pear: Peproximate Mileation: Colla Chevrolet Miles. Period Chevrolet Miles. Period Chevrolet Miles. | alibu with over 91,000 homes, ATVs and other rec  | Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor  Check if this is comm instructions)  Creational vehicles, other vehousesels, snowmobiles, motorcycle | lly s and another unity property (see | Do not deduct secur the amount of any s Creditors Who Have Current value of the entire property?  \$ 6,0 | ecured clain e Claims Se | ns on Schedule in<br>cured by Propert<br>urrent value o<br>ortion you ow | D:<br>ty<br>of the     |
| 5. Add the dol  | lar value of the p  |   | our entries fro Part 2, includi  |                                       |  | Г                        | ¢  | 6.000.00               |
| you have at   | tached for Part 2   | . Write that number here .  |  | >                                     |  |                          | Ψ  | 2,500.00               |
| Part 3:   | Describe Your Per   | sonal and Household Items   |  |                                       |  |                          |  |                        |
| Do you own or   | r have any legal (  | or equitable interest in any  | of the following items?  |                                       |  | <b>portio</b> Do not     | ent value of the on you own?  deduct secured on motions                  |                        |
| Examples:   |   | <b>ishings</b><br>urniture, linens, china, kitchenw   | are  |                                       |  |                          |  |                        |
| Yes.  | Describe  | Furniture, linens, small appliar  | nces, table & chairs, bedroom set  |                                       | \$1,000  | )                        | \$   | 1,000.0 <sub>0</sub> 0 |

Official Form 106A/B Record # 758861 Schedule A/B: Property Page 1 of 6

Filed 08/14/18 Entered 08/14/18 12:10:02

Document Page 11 of 59 umber (if known) Case 18-81728 Doc 1 Desc Main Oscar Debtor 1 First Name 07. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No. Yes. Describe..... \$400 TV, dvd/blu-ray player, music collection, cell phone 400.00 08. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No. Describe..... Yes. 0.00 09. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No. Describe..... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No. Describe..... Yes. 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories es. Describe..... \$200 Everyday clothes, shoes, accessories 200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No. Yes. Describe..... 0.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No. Yes. Describe..... 0.00 14. Any other personal and household items you did not already list, including any health aids you did not list No. Yes. Describe..... 0.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,600.00 for Part 3. Write that number here ----**Describe Your Financial Assets** Part 4: Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own?

Do not deduct secured claims or exemptions

Tvom

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No.

Yes. Describe.....

0.00

Filed 08/14/18

Dega 08/14/18

Last Name F Case 18-81728 Doc 1 Oscar Debtor 1

First Name Middle Name

Entered 08/14/18 12:10:02 Page 12 of 59 umber (if known) Desc Main

Page 3 of 6

| 17. | Deposits o  | f money              |  |            |   |          |          |
|-----|-------------|----------------------|--|------------|---|----------|----------|
|     | Examples:   | Checking, savings    | , or other financial accounts; certifica   | ites of de | eposit; shares in credit unions, brokerage houses,            |          |          |
|     |             | imilar institutions. | If you have multiple accounts with the   | e same i   | nstitution, list each.  |          |          |
|     | No.         |                      |  |            |   |          |          |
|     | Yes.        | Describe             | Account Type:  | Inst       | itution name:   |          |          |
|     |             |                      | Checking Account   |            | Earthmovers Credit Union                                      | \$       | 0.00     |
|     |             |                      | Savings Account  |            | Earthmovers Credit Union                                      | \$       | 0.00     |
|     |             |                      | Checking Account   |            | Old Second  | ¢        | 1,000.00 |
|     |             |                      |  |            |   | Ψ        |          |
| 40  |             |                      | The target of target of the target of target |            |   | \$       | 1,000.00 |
| 18. |             | -                    | ublicly traded stocks  |            | and discounts   |          |          |
|     |             | Bona tunas, invest   | ment accounts with brokerage firms,  | , money    | market accounts   |          |          |
|     | No.         |                      |  |            |   |          |          |
|     | Yes.        | Describe             | Institution or issuer name:  |            |   |          |          |
|     |             |                      |  |            |   | \$       | 0.00     |
| 19. | Non-public  | ly traded stock      | and interests in incorporated a  | and un     | incorporated businesses, including an interest in             |          |          |
|     | No.         |                      |  |            |   |          |          |
|     | Yes.        | Describe             | Name of Entity and Percent of  | Owners     | ship:   |          |          |
|     |             |                      |  |            |   | \$       | 0.00     |
| 20. | Governme    | nt and corporat      | e bonds and other negotiable a   | and no     | n-negotiable instruments                                      |          |          |
|     | Negotiable  | instruments includ   | e personal checks, cashiers' checks,   | , promis   | sory notes, and money orders.                                 |          |          |
|     | Non-negotia | able instruments a   | re those you cannot transfer to some   | eone by    | signing or delivering them.                                   |          |          |
|     | No.         |                      |  |            |   |          |          |
|     | Yes.        | Describe             | Issuer name:   |            |   |          |          |
|     |             |                      |  |            |   | \$       | 0.00     |
| 21. | Retirement  | t or pension acc     | counts   |            |   |          |          |
|     | Examples:   | Interests in IRA, E  | RISA, Keogh, 401(k), 403(b), thrift sa   | avings a   | ccounts, or other pension or profit-sharing plans             |          |          |
|     | No.         |                      |  |            |   |          |          |
|     | Yes.        | Describe             | Type of account and Institution  | name:      |   |          |          |
|     |             | 2000                 | ,,,  |            |   | \$       | 0.00     |
| 22. | Security de | eposits and pre      | navments   |            |   | · ·      |          |
|     | -           | -                    | osits you have made so that you may  | continu    | e service or use from a company                               |          |          |
|     |             |                      | andlords, prepaid rent, public utilities   |            | · ·   |          |          |
|     | No.         |                      |  |            |   |          |          |
|     | Yes.        | Describe             | Institution name or individual:  |            |   |          |          |
|     |             | 2000                 | Security deposit on rental unit  |            | Carol Erickson  | \$       | 725.00   |
|     |             |                      | <b>34</b>  |            |   | \$<br>\$ | 725.00   |
| 22  | Annuition ( | A contract for       | nariadia naumant of manay ta   |            | either for life or for a number of years)                     | <b>a</b> | 723.00   |
| 23. |             | A contract for a     | periodic payment of money to   | o you, e   | stiller for the or for a number of years,                     |          |          |
|     | No.         |                      |  |            |   |          |          |
|     | Yes.        | Describe             | Issuer name and description:   |            |   |          |          |
|     |             |                      |  |            |   | \$       | 0.00     |
| 24. |             |                      |  | d ABLE     | program, or under a qualified state tuition program.          |          |          |
|     |             | §§ 530(b)(1), 529A   | (b), and 529(b)(1).  |            |   |          |          |
|     | No.         |                      |  |            |   |          |          |
|     | Yes.        | Describe             | Institution name and description   | n. Sepa    | arately file the records of any interests.11 U.S.C. § 521(c): |          |          |
|     |             |                      |  |            |   | \$       | 0.00     |
| 25. | Trusts, equ | uitable or future    | interests in property (other the   | an any     | thing listed in line 1), and rights or powers                 |          |          |
|     | No.         |                      |  |            |   |          |          |
|     | Yes.        | Describe             |  |            |   | 1        |          |
|     | _           |                      |  |            |   | \$       | 0.00     |
| 26. | Patents, co | pyrights, trade      | marks, trade secrets, and other  | r intelle  | ectual property   |          |          |
|     | Examples:   | Internet domain na   | ames, websites, proceeds from royalt   | ties and   | licensing agreements  |          |          |
|     | No.         |                      |  |            |   |          |          |
|     | Yes.        | Describe             |  |            |   | 1        |          |
|     |             | 20001100             |  |            |   | \$       | 0.00     |
| 27. | Licenses 1  | franchises, and      | other general intangibles  |            |   |          |          |
|     |             |                      |  | iation ho  | oldings, liquor licenses, professional licenses               |          |          |
|     | No.         | <u> </u>             |  |            |   |          |          |
|     | <b>=</b> ., | Describe             |  |            |   | 1        |          |
|     | Yes.        | บองเกษ               |  |            |   | •        | 0.00     |
|     |             |                      |  |            |   | Ψ        |          |

Case 18-81728 Doc 1 Oscar Debtor 1

Filed 08/14/18

Dega 08/14/18

Last Name F

Desc Main

First Name

Middle Name

Entered 08/14/18 12:10:02 Page 13 of 59 umber (if known)

| Mon | ey or proper                | ty owed to you    | 1?   | Current value of the portion you own? Do not deduct secured claims or exemptions  |
|-----|-----------------------------|-------------------|--|---|
| 28. |                             | owed to you       |  |   |
|     | No. Yes.                    | Describe          |  | 0.00  |
| 29. | Family support Examples: Pa |                   | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement   | \$ <u>0.0</u> 0   |
|     | Yes.                        | Describe          |  | \$0.00  |
| 30. | Examples: Ur                |                   | wes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, d loans you made to someone else           |   |
|     | Yes.                        | Describe          |  | \$ 0.00   |
| 31. |                             | •                 | es r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company Name & Beneficiary:                          |   |
|     | Yes.                        | Describe          | company name a conclusion.   | s 0.00  |
| 32. | If you are the              |                   | at is due you from someone who has died iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive s died.    | <u> </u>  |
|     | =                           | Describe          |  | s 0.00  |
| 33. | _                           | -                 | s, whether or not you have filed a lawsuit or made a demand for payment nent disputes, insurance claims, or rights to sue                          | <u> </u>  |
|     | Yes.                        | Describe          |  | \$0.00  |
| 34. | Other contin                | gent and unliq    | uidated claims of every nature, including counterclaims of the debtor and rights   |   |
|     | Yes.                        | Describe          |  | \$ 0.00   |
| 35. | Any financia<br>No.         | l assets you d    | id not already list  |   |
|     | Yes.                        | Describe          |  | \$0.00  |
| 36. | Add the dolla               | ar value of all o | of your entries from Part 4, including any entries for pages you have attached   |   |
| 1   | or Part 4. Wr               | rite that numbe   | er here>   | \$1,725.00  |
|     | 116 3.                      | •                 | ness-Related Property You Own or Have an Interest In. List any real estate in Part 1.  gal or equitable interest in any business-related property? |   |
| 37. | No. Yes.                    | or nave any le    | gar or equitable interest in any business-related property:  |   |
|     |                             |                   |  | Current value of the portion you own?  Do not deduct secured claims or exemptions |
| 38. | Accounts red<br>No.         | ceivable or co    | mmissions you already earned   |   |
|     | Yes.                        | Describe          |  | \$0.00  |

Case 18-81728 Doc 1 Desc Main Oscar

Filed 08/14/18

Document P Entered 08/14/18 12:10:02 Page 14 of 59 umber (if known) Debtor 1 First Name Middle Name

| 39. Office equipment, furnish Examples: Business-related No.   | nings, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  |                        |
|--|--|------------------------|
| Yes. Describe  |  | \$ 0.00                |
| 40. Machinery, fixtures, equi  | pment, supplies you use in business, and tools of your trade   | ·                      |
| Yes. Describe  |  |                        |
| 41. Inventory  |  | \$0.00                 |
| No.  Yes. Describe   |  |                        |
| 42. Interests in partnerships  | or joint ventures  | \$0.00                 |
| No.  | Name of Entity and Percent of Ownership:   |                        |
| Yes. Describe  | The state of the s | 0.00                   |
| 43. Customer lists, mailing I  | ists, or other compilations  | \$ <u>0.0</u> 0        |
| No.  |  |                        |
| Yes. Describe  |  | \$0.00                 |
| 44. Any business-related pro   | perty you did not already list   |                        |
| Yes. Describe  |  |                        |
|  |  | \$ <u>0.0</u> 0        |
|  | l of your entries from Part 5, including any entries for pages you have attached   | \$ 0.00                |
| TOT FUTCO. WING MICH HUM   |  |                        |
| Part 6: Describe Any Fa  | ırm- and Commercial Fishing-Related Property You Own or Have an Interest In.   |                        |
| If you own or h  | ave an interest in farmland, list it in Part 1.  |                        |
| 46. Do you own or have any   | ave an interest in farmland, list it in Part 1.  legal or equitable interest in any farm- or commercial fishing-related property?  |                        |
|  |  |                        |
| A6. Do you own or have any No. Yes. Describe   |  | \$0.00                 |
| 46. Do you own or have any   | legal or equitable interest in any farm- or commercial fishing-related property?   | \$ <u>0.0</u> 0        |
| No. Yes. Describe  47. Farm animals  Examples: Livestock, poultry  | legal or equitable interest in any farm- or commercial fishing-related property?   |                        |
| A6. Do you own or have any No. Yes. Describe  47. Farm animals  Examples: Livestock, poultry No.   | legal or equitable interest in any farm- or commercial fishing-related property?   | \$ <u>0.00</u>         |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing of No.   | legal or equitable interest in any farm- or commercial fishing-related property?   |                        |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing of No. Yes. Describe   | legal or equitable interest in any farm- or commercial fishing-related property?  /, farm-raised fish  r harvested   |                        |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing of No. Yes. Describe   | legal or equitable interest in any farm- or commercial fishing-related property?   | \$0.00                 |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing of No. Yes. Describe  49. Farm and fishing equipm  | legal or equitable interest in any farm- or commercial fishing-related property?  /, farm-raised fish  r harvested   | \$\$<br>\$0.00         |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing of No. Yes. Describe  49. Farm and fishing equipm No.  | legal or equitable interest in any farm- or commercial fishing-related property?  /, farm-raised fish  r harvested  lent, implements, machinery, fixtures, and tools of trade  | \$ <u>0.0</u> 0        |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing or No. Yes. Describe  49. Farm and fishing equipm No. Yes. Describe  50. Farm and fishing supplies No.   | legal or equitable interest in any farm- or commercial fishing-related property?  /, farm-raised fish  r harvested  lent, implements, machinery, fixtures, and tools of trade  | \$\$<br>\$0.00         |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing or No. Yes. Describe  49. Farm and fishing equipm No. Yes. Describe  50. Farm and fishing supplies No. Yes. Describe   | legal or equitable interest in any farm- or commercial fishing-related property?  //, farm-raised fish  r harvested  lent, implements, machinery, fixtures, and tools of trade  s, chemicals, and feed   | \$\$<br>\$0.00         |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing or No. Yes. Describe  49. Farm and fishing equipm No. Yes. Describe  50. Farm and fishing supplies No. Yes. Describe   | legal or equitable interest in any farm- or commercial fishing-related property?  /, farm-raised fish  r harvested  lent, implements, machinery, fixtures, and tools of trade  | \$\$<br>\$0.00<br>\$0  |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing of No. Yes. Describe  49. Farm and fishing equipm No. Yes. Describe  50. Farm and fishing supplies No. Yes. Describe  51. Any farm- and commercial                   | legal or equitable interest in any farm- or commercial fishing-related property?  //, farm-raised fish  r harvested  lent, implements, machinery, fixtures, and tools of trade  s, chemicals, and feed   | \$\$<br>\$0.00<br>\$\$ |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing of No. Yes. Describe  49. Farm and fishing equipm No. Yes. Describe  50. Farm and fishing supplies No. Yes. Describe  51. Any farm- and commercial No. Yes. Describe | legal or equitable interest in any farm- or commercial fishing-related property?  /, farm-raised fish  r harvested  lent, implements, machinery, fixtures, and tools of trade  s, chemicals, and feed  al fishing-related property you did not already list  | \$\$<br>\$0.00<br>\$0  |
| 46. Do you own or have any No. Yes. Describe  47. Farm animals Examples: Livestock, poultry No. Yes. Describe  48. Crops—either growing of No. Yes. Describe  49. Farm and fishing equipm No. Yes. Describe  50. Farm and fishing supplied No. Yes. Describe  51. Any farm- and commercial No. Yes. Describe | legal or equitable interest in any farm- or commercial fishing-related property?  //, farm-raised fish  r harvested  lent, implements, machinery, fixtures, and tools of trade  s, chemicals, and feed   | \$\$<br>\$0.00<br>\$\$ |

Case 18-81728 Doc 1 Oscar

Debtor 1

First Name Middle Name

Filed 08/14/18 Entered 08/14/18 12:10:02

Document Page 15 of 59 umber (if known)

Page 15 of 59 umber (if known) Desc Main

| Part 7:  Describe All Property You Own or Have an Interest in That You Did Not List Abo                                      | ve          |             |
|--|-------------|-------------|
| 53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No. |             |             |
| Yes. Describe  |             | \$0.00      |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here  | \$0.00      |             |
| Part 8: List the Totals of Each Part of this Form  |             |             |
| 55. Part 1: Total real estate, line 2  |             | \$ 0.00     |
| 56. Part 2: Total vehicles, line 5   | \$ 6,000.00 |             |
| 57. Part 3: Total personal and household items, line 15  | \$ 1,600.00 |             |
| 58. Part 4: Total financial assets, line 36  | \$ 1,725.00 |             |
| 59. Part 5: Total business-related property, line 45   | \$ 0.00     |             |
| 60. Part 6: Total farm- and fishing-related property, line 52  | \$ 0.00     |             |
| 61. Part 7: Total other property not listed, line 54   | \$ 0.00     |             |
| 62. Total personal property. Add lines 56 through 61   | \$ 9,325.00 | \$ 9,325.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62   |             | \$9,325.00  |

Schedule A/B: Property Official Form 106A/B Record # 758861 Page 6 of 6

| Fill in this information to identify your case: |                     |                                       |                     |  |  |  |  |
|---|---------------------|---------------------------------------|---------------------|--|--|--|--|
| Debtor 1  | Oscar               |                                       | Vega                |  |  |  |  |
|   | First Name          | Middle Name                           | Last Name           |  |  |  |  |
| Debtor 2  |                     |                                       |                     |  |  |  |  |
| (Spouse, if filing)                             | First Name          | Middle Name                           | Last Name           |  |  |  |  |
| United States                                   | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | ILLINOIS<br>(State) |  |  |  |  |
| Case Number                                     | r                   |                                       | _                   |  |  |  |  |
| (If known)                                      |                     |                                       |                     |  |  |  |  |

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|   | fy the Property You Claim as Exempt emptions are you claiming? Check | one only, even if your spo           | puse is filing with you.  |                                    |  |  |  |  |
|---|--|--------------------------------------|---|------------------------------------|--|--|--|--|
|   | ming state and federal nonbankrupto                                  |                                      | •   |                                    |  |  |  |  |
| =   | ming federal exemptions. 11 U.S.C.                                   | •                                    |   |                                    |  |  |  |  |
|   | g  | 3(-)(-)                              |   |                                    |  |  |  |  |
| 2. For any propert  | y you list on Schedule A/B that you                                  | u claim as exempt, fill in t         | the information below.  |                                    |  |  |  |  |
| -   | on of the property and line on hat lists this property               | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |  |  |  |  |
|   |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |  |  |  |  |
| Brief description:  | 2013 Chevrolet Malibu with over 91,000 miles.                        | \$_6,000                             | \$ 2,400  | 735 ILCS 5/12-1001(c)              |  |  |  |  |
| Line from Schedule A/B:   | 03   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |
| Brief<br>description:   | Furniture, linens, small appliances, table & chairs, bedroom set     | \$_1,000                             | \$_1,000  | 735 ILCS 5/12-1001(b)              |  |  |  |  |
| Line from Schedule A/B:   | 06   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |
| Brief description:  | TV, dvd/blu-ray player, music collection, cell phone                 | \$_400                               | \$_400  | 735 ILCS 5/12-1001(b)              |  |  |  |  |
| Line from Schedule A/B:   | 07   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |
| Brief<br>description:   | Everyday clothes, shoes, accessories                                 | \$_200                               | \$_200  | 735 ILCS 5/12-1001(a),(e)          |  |  |  |  |
| Line from Schedule A/B:   | 11   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |
|   |  |                                      |   |                                    |  |  |  |  |
| Official Form 106C Record # 758861 Schedule C: The Property You Claim as Exempt Page 1 of 2 |  |                                      |   |                                    |  |  |  |  |

Entered 08/14/18 12:10:02 Desc Main Case 18-81728 Doc 1 Filed 08/14/18 Page 17 of 59 Document Oscar Debtor 1 Middle Name Last Name **Additional Page** Part 2: Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B 735 ILCS 5/12-1001(b) Brief Checking Account, Earthmovers \$ <sup>0</sup> description: Credit Union, 0.00 \$ 0 Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1001(b) Brief Savings Account, Earthmovers **\$**\_ 0 \$\_0 Credit Union, 0.00 description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief Checking Account, Old Second, 735 ILCS 5/12-1001(b) \$ 1,000 \$\_1,000 1,000.00 description: Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit Brief Security deposit on rental unit, 735 ILCS 5/12-1001(b) <sub>\$</sub> 725 \$ 725 Carol Erickson, 725.00 description: Line from 100% of fair market value, up to Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No Yes.

| Fill in this            | Caco 19 917  |                   | 1 Filod 09/14/19   | Entered 08/14/1<br>8 of 59     | .8 12:10:02                        | Desc Main                                 |                     |
|-------------------------|--|-------------------|--|--------------------------------|------------------------------------|---|---------------------|
|                         | Oppor  |                   | Vogo   |                                |                                    |   |                     |
| Debtor 1                | Oscar<br>First Name  | Middle Name       | Vega<br>Last Name  |                                |                                    |   |                     |
| Debtor 2                | r not realite  | Middle Hame       | Edd ( Name   |                                |                                    |   |                     |
| (Spouse, if filing      | g) First Name  | Middle Name       | Last Name  |                                |                                    |   |                     |
| United State            | es Bankruptcy Court for the :!                                     | NORTHERN Di       | strict of ILLINOIS   |                                |                                    |   |                     |
|                         | _  | <u></u> 5.        | (State)  |                                |                                    | Check if this                             | s is an             |
| Case Numb<br>(If known) | oer  |                   |  |                                |                                    | amended fil                               |                     |
| Official I              | Form 106D  |                   |  |                                |                                    | a   | 9                   |
|                         | <u>Form 106D</u>   |                   |  |                                |                                    |   | 40/45               |
|                         |  |                   | Claims Secured by P  |                                |                                    |   | 12/15               |
|                         |  |                   | d people are filing together, both<br>nal Page, fill it out, number the en |                                |                                    | ny  |                     |
|                         | ges, write your name and ca  |                   |  | ,                              |                                    |   |                     |
| 1. Do any c             | reditors have claims secure  | ed by your prop   | perty?   |                                |                                    |   |                     |
| ☐ No. (                 | Check this box and submit th                                       | is form to the co | ourt with your other schedules. You  | u have nothing else to repor   | rt on this form.                   |   |                     |
| Yes.                    | Fill in all of the information be                                  | elow.             |  |                                |                                    |   |                     |
|                         |  |                   |  |                                |                                    |   |                     |
| Part 1:                 | List All Secured Claims  |                   |  |                                |                                    |   | T                   |
| 2. List all s           | secured claims. If a creditor                                      | has more than     | one secured claim, list the creditor                                       | separately                     | Column A                           | Column A                                  | Column C            |
|                         |  |                   | cular claim, list the other creditors                                      | · ·                            | Amount of claim  Do not deduct the | Value of collateral<br>that supports this | Unsecured portion   |
| As much                 | n as possible, list the claims i                                   | n alphabetical o  | order according to the creditors nar                                       | me.                            | value of collateral                | claim                                     | If any              |
| 2.1 GM F                | Financial  |                   | Describe the property that secure  | s the claim:                   | \$ 16,019.00                       | \$ <u>6,000.00</u>                        | <b>\$</b> 10,019.00 |
|                         | r's Name   |                   | 2013 Chevrolet Malibu with over  | 91,000 miles                   | $\neg$                             |   |                     |
| Po Bo                   | ox 181145  |                   |  |                                |                                    |   |                     |
| Numbe                   | er Street  |                   |  |                                |                                    |   |                     |
|                         |  |                   | As of the date you file, the claim is                                      | s: Check all that apply.       |                                    |   |                     |
| Arling                  | yton TX  | 76096             | Contingent Unliquidated  |                                |                                    |   |                     |
| City                    | State  | Zip Code          | Disputed   |                                |                                    |   |                     |
| Who ow                  | ves the debt? Check one.   |                   | Nature of Lien. Check all that apply                                       | r.                             |                                    |   |                     |
| _                       | or 1 only  |                   | An agreement you made (such as   |                                |                                    |   |                     |
| Debto                   | or 2 only  |                   | car loan)  |                                |                                    |   |                     |
| Debto                   | or 1 and Debtor 2 only   |                   | Statutory lien (such as tax lien, me                                       | echanic's lien)                |                                    |   |                     |
| At lea                  | ast one of the debtors and anothe                                  | er                | Judgment lien from a lawsuit   |                                |                                    |   |                     |
| Chec                    | ck if this claim relates to a                                      |                   | Other (including a right to offset) _                                      |                                |                                    |   |                     |
| com                     | munity debt  | 2.04              |  | 0011                           |                                    |   |                     |
| Date De                 | bt was incurred2014-06   | 5-04<br>—         | Last 4 digits of account number _  | <u>8911</u>                    |                                    |   |                     |
| Part 2:                 | List Others to Be Notified fo                                      | or a Debt That Y  | ou Already Listed  |                                |                                    |   |                     |
| Hea this name           | e only if you have others to h                                     | notified about    | your bankruptcy for a debt that you  | ı alroady listed in Part 1 For | evample if a collection            | on agency is                              |                     |
|                         |  |                   | else, list the creditor in Part 1, and t                                   | -                              | •                                  |   |                     |
|                         | ditor for any of the debts that<br>1, do not fill out or submit th | -                 | rt 1, list the additional creditors her                                    | re. If you do not have additio | nal persons to be not              | fied for any                              |                     |
| r wit                   | ,  | . L-94.           |  |                                |                                    |   |                     |
|                         |  |                   |  |                                |                                    |   |                     |

|   |   | Caco 10 01720  | Doc 1   | Eilad 09/1//19   | Entered 08/14/18 12   | :10:02 [  | Desc Mair             | 1                  |
|---|---|--|---|--|---|---|-----------------------|--------------------|
| Fill                                      | l in this inf   | formation to identify your case  |   |  | 9 of 59   |   |                       |                    |
| De  | ebtor 1   | Oscar  |   | Vega   |   |   |                       |                    |
| DC  | 20101 1   | First Name Mid   | ddle Name   | Last Name  |   |   |                       |                    |
| De  | ebtor 2   |  |   |  |   |   |                       |                    |
| (Sp                                       | ouse, if filing)  | First Name Mid   | ddle Name   | Last Name  |   |   |                       |                    |
| Ur  | nited States I  | Bankruptcy Court for the : <u>NORTH</u>  | HERN_ Distri  | ct of _ILLINOIS  |   |   |                       |                    |
| Ca  | ase Number  |  |   | (State)  |   |   | Check                 | if this is an      |
|   | known)  |  |   |  |   |   | amend                 | ed filing          |
| Offi                                      | cial Fo   | orm 106E/F   |   |  |   |   |                       |                    |
|   |   | E/F: Creditors Who   | Have I  | Insecured Claims   |   |   |                       | 12/15              |
| ist th<br>/B: F<br>redit<br>eede<br>op of | ne other pa<br>Property (Cors with pa<br>ed, copy the<br>any additi | arty to any executory contracts<br>Official Form 106A/B) and on So<br>artially secured claims that are | or unexpire<br>chedule G: le<br>listed in Sc<br>nber the entr<br>and case nur | ed leases that could result in a<br>Executory Contracts and Une<br>chedule D: Creditors Who Havies in the boxes on the left. A | s and Part 2 for creditors with NON<br>a claim. Also list executory contrac<br>expired Leases (Official Form 106G)<br>re Claims Secured by Property. If n<br>attach the Continuation Page to this | ts on <i>Schedul</i> e<br>. Do not include<br>nore space is |                       |                    |
| 1. D                                      | o any cred  | litors have priority unsecured   | claims agair  | nst you?   |   |   |                       |                    |
|   | No. Go  | to Part 2.   |   |  |   |   |                       |                    |
| Ē   | Yes.  |  |   |  |   |   |                       |                    |
| e<br>n<br>u                               | each claim I<br>conpriority a<br>insecured o                        | listed, identify what type of claim amounts. As much as possible, l                                    | n it is. If a cla<br>list the claim<br>Page of Part                           | im has both priority and nonpri<br>s in alphabetical order accordi<br>1. If more than one creditor ho                          | ecured claim, list the creditor separariority amounts, list that claim here annound to the creditor's name. If you have lds a particular claim, list the other cruction booklet.)                 | d show both price more than two                             | ority and<br>priority |                    |
|   |   |  |   |  |   | Total claim   | Priority amount       | Nonpriority amount |
| Po  | nt 2:   | ist All of Your NONPRIORITY Un   | secured Clai  | ms   |   |   | umount                | umount             |
|   |   | litors have nonpriority unsecu   | rod claims a  | egainst you?   |   |   |                       |                    |
| J. D                                      | _   | have nothing to report in this p   |   |  | other schedules   |   |                       |                    |
|   | Yes.  | a nave nothing to report in this p   | art. Submit   | this form to the court with your   | Other scriedules.   |   |                       |                    |
| 4. L                                      |   | our nonpriority unsecured clair  | ms in the alr   | ohabetical order of the credito  | or who holds each claim. If a credito   | or has more than  | one                   |                    |
| n<br>ir                                   | onpriority uncluded in F  | unsecured claim, list the creditor   | separately for holds a part   | for each claim. For each claim   | listed, identify what type of claim it is<br>tors in Part 3.If you have more than t   | . Do not list clair   | ms already            |                    |
|   | -   |  |   |  |   |   |                       | Total claim        |
| 4.1                                       | AVANT<br>Creditor's N   | lama   | _ La  | ast 4 digits of account number   | 1672  |   |                       | \$ 3,096.00        |
|   |   | asalle Suite 170   | _ w   | /hen was the debt incurred?  | 2015-2017   |   |                       |                    |
|   | Number  | Street   |   |  |   |   |                       |                    |
|   |   |  | _ <u>A</u>  | s of the date you file, the claim  | is: Check all that apply.   |   |                       |                    |
|   | Chicago   | IL 60601   | ,   | Contingent   |   |   |                       |                    |
|   | City  | State Zip Coo  | de L  | Unliquidated Disputed  |   |   |                       |                    |
|   | Debtor 1  | the debt? Check one.   | _   |  |   |   |                       |                    |
|   | Debtor 2  | •  | T   | ype of NONPRIORITY unsecure  | d claim:  |   |                       |                    |
|   | =   | and Debtor 2 only  | Ė   | Student loans.   |   |   |                       |                    |
|   | =   | one of the debtors and another   |   | Obligations arising out of a separ   | ration agreement or divorce   |   |                       |                    |
|   |   | if this claim relates to a   | _   | that you did not report as priority  |   |   |                       |                    |
|   |   | nity debt  | L   | Debts to pension or profit-sharing   | g plans, and other similar debts  |   |                       |                    |
|   | No No   | 1 subject to offest?   | _   | Domond Lea   | an.   |   |                       |                    |
|   | Yes   |  |   | Other. Specify Personal Loa  | 411   |   |                       |                    |
|   |   |  |   |  |   |   |                       |                    |

Document Page 20 of 59 Oscar Debtor 1

| Pε    | Your NONPRIORITY Unsecured Claims - C           | Continuation Page                       |                               |                    |
|-------|---|---|-------------------------------|--------------------|
| After | listing any entries on this page, number them b | peginning with 4.4, followed by 4.5, an | nd so forth.                  | Total Claim        |
| 4.2   | BK OF AMER                                      | Last 4 digits of account number         | NULL                          | \$ <u>4,082.00</u> |
|       | Creditor's Name                                 |   | 2013-2017                     |                    |
|       | Po Box 982238                                   | When was the debt incurred?             | 2013-2017                     |                    |
|       | Number Street                                   |   |                               |                    |
|       |   | As of the date you file, the claim is:  | Check all that apply.         |                    |
|       |   | Contingent                              | ,                             |                    |
|       | El Paso TX 79998                                | Unliquidated                            |                               |                    |
|       | City State Zip Code                             |   |                               |                    |
|       | Who owes the debt? Check one.                   | Disputed                                |                               |                    |
|       | Debtor 1 only                                   |   |                               |                    |
|       | Debtor 2 only                                   | Type of NONPRIORITY unsecured of        | claim:                        |                    |
|       | Debtor 1 and Debtor 2 only                      | Student loans.                          |                               |                    |
|       | At least one of the debtors and another         | Obligations arising out of a separati   | on agreement or divorce       |                    |
|       | Check if this claim relates to a                | that you did not report as priority cla | aims                          |                    |
|       | community debt                                  | Debts to pension or profit-sharing pl   | lans, and other similar debts |                    |
|       | Is the claim subject to offest?                 |   |                               |                    |
|       | No  | Other. Specify Credit Card or 0         | Credit Use                    |                    |
|       | Yes   |   |                               |                    |
| 4.3   | Capitalone                                      | Last 4 digits of account number         | NULL                          | <b>\$_416.00</b>   |
| 1.0   | Creditor's Name                                 | <u> </u>                                | <del></del>                   |                    |
|       | 15000 Capital One Dr                            | When was the debt incurred?             | 2009-2017                     |                    |
|       | Number Street                                   |   |                               |                    |
|       |   | As of the date you file, the claim is:  | Check all that apply          |                    |
|       |   |   | Спеск ан так арру.            |                    |
|       | Richmond VA 23238                               | Contingent                              |                               |                    |
|       | City State Zip Code                             | Unliquidated                            |                               |                    |
|       | Who owes the debt? Check one.                   | Disputed                                |                               |                    |
|       | Debtor 1 only                                   |   |                               |                    |
|       | Debtor 2 only                                   | Type of NONPRIORITY unsecured of        | claim:                        |                    |
|       | Debtor 1 and Debtor 2 only                      | Student loans.                          |                               |                    |
|       | At least one of the debtors and another         | Obligations arising out of a separati   | on agreement or divorce       |                    |
|       | Check if this claim relates to a                | that you did not report as priority cla | -                             |                    |
|       | community debt                                  | Debts to pension or profit-sharing pl   |                               |                    |
|       | Is the claim subject to offest?                 |   |                               |                    |
|       | No  | Other. Specify Credit Card or 0         | Credit Use                    |                    |
|       | Yes   | Canon. Opening                          | <del></del>                   |                    |
| 4.4   | Capitalone                                      | Last 4 digits of account number         | NULL                          | \$ 2,227.00        |
|       | Creditor's Name                                 | <u> </u>                                | <del></del>                   |                    |
|       | 15000 Capital One Dr                            | When was the debt incurred?             | 2009-2016                     |                    |
|       | Number Street                                   |   |                               |                    |
|       |   | As of the date you file, the claim is:  | Check all that apply          |                    |
|       |   | _                                       | Check all that apply.         |                    |
|       | Richmond VA 23238                               | Contingent                              |                               |                    |
|       | City State Zip Code                             | Unliquidated                            |                               |                    |
|       | Who owes the debt? Check one.                   | Disputed                                |                               |                    |
|       | Debtor 1 only                                   |   |                               |                    |
|       | Debtor 2 only                                   | Type of NONPRIORITY unsecured of        | claim:                        |                    |
|       | Debtor 1 and Debtor 2 only                      | Student loans.                          |                               |                    |
|       | At least one of the debtors and another         | Obligations arising out of a separati   | on agreement or divorce       |                    |
|       | Check if this claim relates to a                | that you did not report as priority cla | -                             |                    |
|       | community debt                                  | Debts to pension or profit-sharing pl   |                               |                    |
|       | Is the claim subject to offest?                 |   |                               |                    |
|       | No  | Other. Specify Credit Card or 0         | Credit Use                    |                    |
|       | Yes   |   | <del></del>                   |                    |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 21 of 59
Case Number (if known) Document Oscar Debtor 1

| Pa    | Your NONPRIORITY Unsecured Claims - C             | Continuation Page   |                    |
|-------|---|---|--------------------|
| After | listing any entries on this page, number them b   | peginning with 4.4, followed by 4.5, and so forth.  | Total Claim        |
| 4.5   | Cavalry Portfolio SPV I                           | Last 4 digits of account number   | \$ <u>2,456.00</u> |
|       | Creditor's Name                                   | When was the debt incurred? 2018  |                    |
|       | PO Box 1030                                       | When was the debt incurred?   |                    |
|       | Number Street                                     |   |                    |
|       |   | As of the date you file, the claim is: Check all that apply.  |                    |
|       | NV 40500  | Contingent  |                    |
|       | Hawthorne NY 10532                                | Unliquidated  |                    |
|       | City State Zip Code Who owes the debt? Check one. | Disputed  |                    |
|       | Debtor 1 only                                     |   |                    |
|       | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:  |                    |
|       | Debtor 1 and Debtor 2 only                        | Student loans.  |                    |
|       | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce  |                    |
|       | Check if this claim relates to a                  | that you did not report as priority claims  |                    |
|       | community debt                                    | Debts to pension or profit-sharing plans, and other similar debts   |                    |
|       | Is the claim subject to offest?                   |   |                    |
|       | No  | Other. Specify Credit Card or Credit Use  |                    |
|       | Yes   | NIII I  |                    |
| 4.6   | Chase CARD  | Last 4 digits of account numberNULL   | \$ <u>2,428.00</u> |
|       | Creditor's Name Po Box 15298                      | When was the debt incurred? 2014-2017   |                    |
|       | Number Street                                     | When was the debt incurred:   |                    |
|       | Number Succe                                      |   |                    |
|       |   | As of the date you file, the claim is: Check all that apply.  |                    |
|       | Wilmington DE 19850                               | Contingent  |                    |
|       | City State Zip Code                               | Unliquidated  |                    |
|       | Who owes the debt? Check one.                     | Disputed  |                    |
|       | Debtor 1 only                                     |   |                    |
|       | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:  |                    |
|       | Debtor 1 and Debtor 2 only                        | Student loans.  |                    |
|       | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce  |                    |
|       | Check if this claim relates to a                  | that you did not report as priority claims  |                    |
|       | community debt                                    | Debts to pension or profit-sharing plans, and other similar debts   |                    |
|       | Is the claim subject to offest?                   | Credit Cord or Credit Llee  |                    |
|       | Yes   | Other. Specify Credit Card or Credit Use  |                    |
| 4.7   | CITI  | Last 4 digits of account numberNULL   | <b>\$</b> 1,958.00 |
| 4.7   | Creditor's Name                                   | Last 4 digits of account number   | <del>*</del>       |
|       | Po Box 6241                                       | When was the debt incurred? 2015-2018   |                    |
|       | Number Street                                     |   |                    |
|       |   | As of the date you file, the claim is: Check all that apply.  |                    |
|       |   | Contingent  |                    |
|       | Sioux Falls SD 57117                              | Unliquidated  |                    |
|       | City State Zip Code                               | Disputed  |                    |
|       | Who owes the debt? Check one.                     |   |                    |
|       | Debtor 1 only                                     | Turns of MONIPPIOPITY unconsumed also   |                    |
|       | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim: Student loans.   |                    |
|       | Debtor 1 and Debtor 2 only                        | Obligations arising out of a separation agreement or divorce  |                    |
|       | At least one of the debtors and another           | that you did not report as priority claims  |                    |
|       | Check if this claim relates to a community debt   | Debts to pension or profit-sharing plans, and other similar debts   |                    |
|       | Is the claim subject to offest?                   | Socia to periode of profit-originity prairie, and other similar debts   |                    |
|       | No  | Other. Specify Credit Card or Credit Use  |                    |
|       | Yes   | Salah Oponiy Table 1 Ta |                    |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 22 of 59
Case Number (if known) Document Oscar Debtor 1

| P     | Your NONPRIORITY Unsecured Claims - C              | ontinuation Page                        |                                |  |
|-------|--|---|--------------------------------|--|
| After | listing any entries on this page, number them be   | eginning with 4.4, followed by 4.5, ar  | nd so forth.                   | Total Claim  |
| 4.8   | Citibank   | Last 4 digits of account number         | 0815                           | \$ <u>2,454.00</u>   |
|       | Creditor's Name                                    |   |                                |  |
|       | Po Box 27288                                       | When was the debt incurred?             | 2017-2017                      |  |
|       | Number Street                                      |   |                                |  |
|       |  | As of the date you file, the claim is:  | : Check all that apply.        |  |
|       |  | Contingent                              |                                |  |
|       | Tempe AZ 85285                                     | Unliquidated                            |                                |  |
|       | City State Zip Code Who owes the debt? Check one.  | Disputed                                |                                |  |
|       | Debtor 1 only                                      |   |                                |  |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured           | claim:                         |  |
|       | Debtor 1 and Debtor 2 only                         | Student loans.                          |                                |  |
|       | At least one of the debtors and another            | Obligations arising out of a separati   | ion agreement or divorce       |  |
|       | Check if this claim relates to a                   | that you did not report as priority cla | aims                           |  |
|       | community debt                                     | Debts to pension or profit-sharing p    | lans, and other similar debts  |  |
|       | Is the claim subject to offest?                    |   |                                |  |
|       | No   | Other. Specify Collecting for C         | Creditor                       |  |
|       | Yes  |   |                                |  |
| 4.9   | DEPT OF EDUCATION/NELN                             | Last 4 digits of account number         | 3859                           | \$ <u>2,609.00</u>   |
|       | Creditor's Name                                    |   | 2014-2017                      |  |
|       | 121 S 13Th St                                      | When was the debt incurred?             | 2014-2017                      |  |
|       | Number Street                                      |   |                                |  |
|       |  | As of the date you file, the claim is:  | : Check all that apply.        |  |
|       |  | Contingent                              |                                |  |
|       | Lincoln NE 68508                                   | Unliquidated                            |                                |  |
|       | City State Zip Code  Who owes the debt? Check one. | Disputed                                |                                |  |
|       |  | ш .                                     |                                |  |
|       | Debtor 1 only                                      | T ( NONDRIGHTY                          | -1-1                           |  |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | ciaim:                         | Interest keeps running on most   |
|       | Debtor 1 and Debtor 2 only                         | Student loans.                          | ·                              | non-dischargeable debts including student loans,   |
|       | At least one of the debtors and another            | Obligations arising out of a separati   | -                              | and other educational debts. You may owe more  |
|       | Check if this claim relates to a                   | that you did not report as priority cla |                                | after the case is over than you did before filing.   |
|       | community debt Is the claim subject to offest?     | Debts to pension or profit-sharing p    | lians, and other similar debts |  |
|       | No   | Поио                                    |                                |  |
|       | Yes  | Other. Specify                          |                                |  |
| 4.40  | T DEDT OF EDUCATION/NELN                           | Last 4 digits of account number         | 6759                           | <b>\$</b> 5,167.00   |
| 4.10  | Creditor's Name                                    | Last 4 digits of account number         |                                | <u> </u>   |
|       | 121 S 13Th St                                      | When was the debt incurred?             | 2014-2017                      |  |
|       | Number Street                                      |   |                                |  |
|       |  | A of the data way file the alaim is     | Observational threat arrests.  |  |
|       | <del></del>  | As of the date you file, the claim is:  | : Cneck all that apply.        |  |
|       | Lincoln NE 68508                                   | Contingent                              |                                |  |
|       | City State Zip Code                                | Unliquidated                            |                                |  |
|       | Who owes the debt? Check one.                      | Disputed                                |                                |  |
|       | Debtor 1 only                                      |   |                                |  |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured           | claim:                         |  |
|       | Debtor 1 and Debtor 2 only                         | Student loans.                          |                                | Interest keeps running on most   |
|       | At least one of the debtors and another            | Obligations arising out of a separati   | ion agreement or divorce       | non-dischargeable debts including student loans,   |
|       | Check if this claim relates to a                   | that you did not report as priority cla | aims                           | and other educational debts. You may owe more after the case is over than you did before filing. |
|       | community debt                                     | Debts to pension or profit-sharing p    | lans, and other similar debts  | <b>,</b>   |
|       | Is the claim subject to offest?                    |   |                                |  |
|       | No   | Other. Specify                          |                                |  |
|       | Yes  |   |                                |  |

Schedule E/F: Creditors Who Have Unsecured Claims

Document Page 23 of 59 Oscar Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

| After I | isting any entries on this page, number them b     | peginning with 4.4, followed by 4.5, and so forth.                | Total Claim   |
|---------|--|---|---|
| 4.11    | DEPT OF EDUCATION/NELN                             | Last 4 digits of account number9655                               | \$ <u>5,500.00</u>  |
|         | Creditor's Name 121 S 13Th St                      | When was the debt incurred? 2016-2017                             |   |
|         | Number Street                                      | As of the data you file the plains in Charle III that such        |   |
|         |  | As of the date you file, the claim is: Check all that apply.      |   |
|         | Lincoln NE 68508                                   | Contingent  |   |
|         | City State Zip Code                                | Unliquidated  |   |
| ,       | Who owes the debt? Check one.                      | Disputed  |   |
|         | Debtor 1 only                                      | Town of NONDRIODITY was a second all live                         |   |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              | Interest keeps running on most  |
|         | Debtor 1 and Debtor 2 only                         | Student loans.  | non-dischargeable debts including student loans,                                |
|         | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      | and other educational debts. You may owe more                                   |
|         | Check if this claim relates to a                   | that you did not report as priority claims                        | after the case is over than you did before filing.                              |
|         | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |   |
|         | Is the claim subject to offest?                    | _   |   |
|         | =  | Other. Specify  |   |
|         | LIYes  | 0755  | . 7 004 00  |
| 4.12    | DEPT OF EDUCATION/NELN                             | Last 4 digits of account number9755                               | \$ <u>7,221.00</u>  |
|         | Creditor's Name                                    | When was the debt incorrect? 2016-2017                            |   |
|         | 121 S 13Th St                                      | When was the debt incurred?                                       |   |
|         | Number Street                                      |   |   |
|         |  | As of the date you file, the claim is: Check all that apply.      |   |
|         |  | Contingent  |   |
|         | Lincoln NE 68508                                   | Unliquidated  |   |
| ١,      | City State Zip Code  Who owes the debt? Check one. | Disputed  |   |
|         |  |   |   |
|         | Debtor 1 only                                      |   |   |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              | Indooral language and another the second  |
|         | Debtor 1 and Debtor 2 only                         | Student loans.  | Interest keeps running on most non-dischargeable debts including student loans, |
|         | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      | and other educational debts. You may owe more                                   |
|         | Check if this claim relates to a                   | that you did not report as priority claims                        | after the case is over than you did before filing.                              |
|         | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |   |
|         | Is the claim subject to offest?                    |   |   |
|         | No   | Other. Specify  |   |
|         | ∐Yes   |   |   |
| 4.13    | Discover FIN SVCS LLC Creditor's Name              | Last 4 digits of account number NULL                              | \$ <u>2,168.00</u>  |
|         | Po Box 15316                                       | When was the debt incurred? 2013-2016                             |   |
|         | Number Street                                      |   |   |
|         |  | As of the date you file, the claim is: Check all that apply.      |   |
|         | Wilesia atom                                       | Contingent  |   |
|         | Wilmington DE 19850                                | Unliquidated  |   |
| ١,      | City State Zip Code  Who owes the debt? Check one. | Disputed  |   |
|         | Debtor 1 only                                      |   |   |
|         |  | T (NONDDIODITY  |   |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |   |
|         | Debtor 1 and Debtor 2 only                         | ☐ Student loans.  |   |
|         | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |   |
|         | Check if this claim relates to a                   | that you did not report as priority claims                        |   |
|         | community debt Is the claim subject to offest?     | Debts to pension or profit-sharing plans, and other similar debts |   |
|         | No   | Credit Cord or Credit Lie   |   |
|         | Yes  | Other. Specify Credit Card or Credit Use                          |   |

Document Page 24 of 59 Oscar Debtor 1

| Pa    | Your NONPRIORITY Unsecured Claims - C              | ontinuation Page                        |                         |                     |
|-------|--|---|-------------------------|---------------------|
| After | isting any entries on this page, number them b     | eginning with 4.4, followed by 4.5, an  | d so forth.             | Total Claim         |
| 4.14  | Earthmover CU                                      | Last 4 digits of account number         | 6563                    | \$ <u>1,060.00</u>  |
|       | Creditor's Name                                    |   | 2047 2047               |                     |
|       | Po Box 2937  | When was the debt incurred?             | 2017-2017               |                     |
|       | Number Street                                      |   |                         |                     |
|       |  | As of the date you file, the claim is:  | Check all that apply.   |                     |
|       |  | Contingent                              |                         |                     |
|       | Aurora IL 60507                                    | Unliquidated                            |                         |                     |
|       | City State Zip Code Who owes the debt? Check one.  | Disputed                                |                         |                     |
|       | Debtor 1 only                                      |   |                         |                     |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | claim:                  |                     |
|       | Debtor 1 and Debtor 2 only                         | Student loans.                          |                         |                     |
|       | At least one of the debtors and another            | Obligations arising out of a separati   | on agreement or divorce |                     |
|       | Check if this claim relates to a                   | that you did not report as priority cla |                         |                     |
|       | community debt                                     | Debts to pension or profit-sharing pl   |                         |                     |
|       | Is the claim subject to offest?                    |   |                         |                     |
|       | No   | Other. Specify Personal Loan            |                         |                     |
|       | Yes  |   |                         |                     |
| 4.15  | Earthmovers CU                                     | Last 4 digits of account number         | NULL                    | <b>\$</b> _1,513.00 |
|       | Creditor's Name                                    |   | 2007-2017               |                     |
|       | Po Box 2937  | When was the debt incurred?             | 2007-2017               |                     |
|       | Number Street                                      |   |                         |                     |
|       |  | As of the date you file, the claim is:  | Check all that apply.   |                     |
|       |  | Contingent                              |                         |                     |
|       | Aurora IL 60507                                    | Unliquidated                            |                         |                     |
|       | City State Zip Code  Who owes the debt? Check one. | Disputed                                |                         |                     |
|       | Debtor 1 only                                      | _                                       |                         |                     |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | laim:                   |                     |
|       | Debtor 1 and Debtor 2 only                         | Student loans.                          | num.                    |                     |
|       | At least one of the debtors and another            | Obligations arising out of a separati   | on agreement or divorce |                     |
|       | Check if this claim relates to a                   | that you did not report as priority cla |                         |                     |
|       | community debt                                     | Debts to pension or profit-sharing pl   |                         |                     |
|       | Is the claim subject to offest?                    |   | •                       |                     |
|       | No   | Other. Specify Credit Card or 0         | Credit Use              |                     |
|       | Yes  | _                                       |                         |                     |
| 4.16  | Kohls/Capone                                       | Last 4 digits of account number         | NULL                    | <b>\$</b> _1,631.00 |
|       | Creditor's Name                                    |   | 2010-2018               |                     |
|       | N56 W 17000 Ridgewood Dr                           | When was the debt incurred?             | 2010-2010               |                     |
|       | Number Street                                      |   |                         |                     |
|       |  | As of the date you file, the claim is:  | Check all that apply.   |                     |
|       | Management Falls Mill 50054                        | Contingent                              |                         |                     |
|       | Menomonee Falls WI 53051                           | Unliquidated                            |                         |                     |
|       | City State Zip Code Who owes the debt? Check one.  | Disputed                                |                         |                     |
|       | Debtor 1 only                                      |   |                         |                     |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | claim:                  |                     |
|       | Debtor 1 and Debtor 2 only                         | Student loans.                          |                         |                     |
|       | At least one of the debtors and another            | Obligations arising out of a separati   | on agreement or divorce |                     |
|       | Check if this claim relates to a                   | that you did not report as priority cla |                         |                     |
|       | community debt                                     | Debts to pension or profit-sharing pl   |                         |                     |
|       | ls the claim subject to offest?                    | _                                       |                         |                     |
|       | No   | Other. Specify Credit Card or 0         | Credit Use              |                     |
|       | Yes  | •                                       |                         |                     |

Document Page 25 of 59 Case Number (if known) Oscar Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

| After | listing any entries on this page, number them b         | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim  |
|-------|---|---|--|
| 4.17  | National Louis University                               | Last 4 digits of account number1767                               | \$ <u>3,931.00</u>   |
|       | Creditor's Name  4200 Cantera Dr Ste 211  Number Street | When was the debt incurred? 2016-2017                             |  |
|       |   | As of the date you file, the claim is: Check all that apply.      |  |
|       | Managarilla II COFFF                                    | Contingent  |  |
|       | Warrenville IL 60555                                    | Unliquidated  |  |
|       | City State Zip Code  Who owes the debt? Check one.      | Disputed  |  |
|       | Debtor 1 only   |   |  |
|       |   | Turns of NONDRIORITY  |  |
|       | Debtor 2 only   | Type of NONPRIORITY unsecured claim:                              |  |
|       | Debtor 1 and Debtor 2 only                              | Student loans.  |  |
|       | At least one of the debtors and another                 | Obligations arising out of a separation agreement or divorce      |  |
|       | Check if this claim relates to a                        | that you did not report as priority claims                        |  |
|       | community debt  | Debts to pension or profit-sharing plans, and other similar debts |  |
|       | Is the claim subject to offest?                         |   |  |
|       | ■ No  | Other. Specify Collecting for Creditor                            |  |
|       | ∐ Yes   |   |  |
| 4.18  |   | Last 4 digits of account number                                   | \$ <u>0.00</u>   |
|       | Creditor's Name   |   |  |
|       | 401 S. State Street                                     | When was the debt incurred?                                       |  |
|       | Number Street   |   |  |
|       |   | As of the date you file, the claim is: Check all that apply.      |  |
|       |   | Contingent  |  |
|       | Chicago IL 60605  | Unliquidated  |  |
|       | City State Zip Code                                     | Disputed  |  |
|       | Who owes the debt? Check one.                           |   |  |
|       | Debtor 1 only   |   |  |
|       | Debtor 2 only   | Type of NONPRIORITY unsecured claim:                              |  |
|       | Debtor 1 and Debtor 2 only                              | Student loans.  | Interest keeps running on most   |
|       | At least one of the debtors and another                 | Obligations arising out of a separation agreement or divorce      | non-dischargeable debts including student loans, and other educational debts. You may owe more |
|       | Check if this claim relates to a                        | that you did not report as priority claims                        | after the case is over than you did before filing.   |
|       | community debt  | Debts to pension or profit-sharing plans, and other similar debts | g.   |
|       | Is the claim subject to offest?                         | _   |  |
|       | No  | Other. Specify  |  |
|       | Yes   |   |  |
| 4.19  | -   | Last 4 digits of account number NULL                              | \$ <u>0.00</u>   |
|       | Creditor's Name Po Box 965005                           | When was the debt incurred? 2010-2016                             |  |
|       |   | when was the debt incurred?                                       |  |
|       | Number Street   |   |  |
|       |   | As of the date you file, the claim is: Check all that apply.      |  |
|       |   | Contingent  |  |
|       | Orlando FL 32896  | Unliquidated  |  |
|       | City State Zip Code                                     | Disputed  |  |
|       | Who owes the debt? Check one.                           | □   |  |
|       | Debtor 1 only   |   |  |
|       | Debtor 2 only   | Type of NONPRIORITY unsecured claim:                              |  |
|       | Debtor 1 and Debtor 2 only                              | Student loans.  |  |
|       | At least one of the debtors and another                 | Obligations arising out of a separation agreement or divorce      |  |
|       | Check if this claim relates to a                        | that you did not report as priority claims                        |  |
|       | community debt  | Debts to pension or profit-sharing plans, and other similar debts |  |
|       | Is the claim subject to offest?                         |   |  |
|       | No  | Other. Specify Credit Card or Credit Use                          |  |
| 1     | Yes   |   |  |

Page 26 of 59 Document Debtor 1 Oscar

Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them be     | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim        |
|----------|--|---|--------------------|
| 4.20     | Syncb/SAMS CLUB                                    | Last 4 digits of account number NULL                              | \$ <u>507.00</u>   |
|          | Creditor's Name                                    | 2010 2017   |                    |
|          | Po Box 965005                                      | When was the debt incurred? 2013-2017                             |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          |  | Contingent  |                    |
|          | Orlando FL 32896                                   | Unliquidated  |                    |
| ١,       | City State Zip Code  Who owes the debt? Check one. | Disputed  |                    |
| ì        | Debtor 1 only                                      |   |                    |
| ŀ        | Debtor 2 only                                      | Turns of NONDRIGORY was sound alsimo                              |                    |
|          | <b>=</b>   | Type of NONPRIORITY unsecured claim:  Student loans.              |                    |
|          | Debtor 1 and Debtor 2 only                         |   |                    |
| Ļ        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
| l l      | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
| ١,       | community debt<br>s the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts |                    |
| i        | No   | Other, Specify Credit Card or Credit Use                          |                    |
|          | Yes  | Other. Specify Credit Card or Credit Use                          |                    |
| 4 24     | Syncb/WALMART DC                                   | Last 4 digits of account number NULL                              | \$ 0.00            |
| 4.21     | Creditor's Name                                    | Last 4 digits of account number                                   | <u> </u>           |
|          | Po Box 965024                                      | When was the debt incurred? 2013-2017                             |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file the plain is. Cheek all that apply        |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          | Orlando FL 32896                                   | Contingent  |                    |
|          | City State Zip Code                                | Unliquidated  |                    |
| V        | Vho owes the debt? Check one.                      | Disputed  |                    |
|          | Debtor 1 only                                      |   |                    |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
| [        | Debtor 1 and Debtor 2 only                         | Student loans.  |                    |
| [        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
| Ī        | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
| ١.       | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                    |
| 1        | s the claim subject to offest?                     |   |                    |
|          | No   | Other. Specify Credit Card or Credit Use                          |                    |
|          | Yes  |   |                    |
| 4.22     | Synchrony BANK                                     | Last 4 digits of account number4962                               | <b>\$</b> 5,382.00 |
|          | Creditor's Name                                    | When was the debt incurred? 2016-2017                             |                    |
|          | 2365 Northside Dr Ste 30                           | When was the debt incurred? 2016-2017                             |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          |  | Contingent  |                    |
|          | San Diego CA 92108                                 | Unliquidated  |                    |
| ١.       | City State Zip Code  Who owes the debt? Check one. | Disputed  |                    |
| ĭ        | Debtor 1 only                                      |   |                    |
|          | <b>=</b>   | Turns of NONDRIORITY and a series                                 |                    |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
|          | Debtor 1 and Debtor 2 only                         | Student loans.  |                    |
| إ        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
| L        | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
| ١ .      | community debt s the claim subject to offest?      | Debts to pension or profit-sharing plans, and other similar debts |                    |
| i        | No   | Out - Out of Unknown Credit Extension                             |                    |
|          | Yes  | Other. SpecifyUnknown Credit Extension                            |                    |

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Qoçument Page 27 of 59

| Debtor 1 Oscar  | Qgument Page 27 0159<br>Case Number (if known)                    |                    |
|---|---|--------------------|
| 4.23 First Name Middle Name Synchrony BANK              | Last Name  Last 4 digits of account number 4581                   | <u>\$ 8,667.00</u> |
| Creditor's Name 120 Corporate Blvd Ste 1  Number Street | When was the debt incurred? 2016-2017                             |                    |
| - Greek   | As of the date you file, the claim is: Check all that apply.      |                    |
| Norfolk VA 23502  | ☐ Contingent ☐ Unliquidated                                       |                    |
| City State Zip Code Who owes the debt? Check one.       | Disputed  |                    |
| Debtor 1 only   |   |                    |
| Debtor 2 only   | Type of NONPRIORITY unsecured claim:                              |                    |
| Debtor 1 and Debtor 2 only                              | Student loans.  |                    |
| At least one of the debtors and another                 | Obligations arising out of a separation agreement or divorce      |                    |
| Check if this claim relates to a                        | that you did not report as priority claims                        |                    |
| community debt  | Debts to pension or profit-sharing plans, and other similar debts |                    |
| Is the claim subject to offest?                         |   |                    |
| No Yes  | Other. Specify Unknown Credit Extension                           |                    |

List Others to Be Notified for a Debt That You Already Listed

Page 28 of 59 Document Oscar Debtor 1

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. DeKalb County Circuit Clerk, 18sc635 On which entry in Part 1 or Part 2 list the original creditor? Name 133 W State St. Part 1: Creditors with Priority Unsecured Claims Line 4 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Number IL 60178 Sycamore Last 4 digits of account number \_\_\_\_ \_\_\_ State Zip Code Blitt and Gaines, PC, Bankruptcy Dept. On which entry in Part 1 or Part 2 list the original creditor? Name Line 4 of (Check one): Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave. Part 2: Creditors with Nonpriority Unsecured Claims Street Number Last 4 digits of account number \_\_\_\_ \_\_\_\_\_ City State Zip Code DeKalb County Circuit Clerk, 17SC1036 On which entry in Part 1 or Part 2 list the original creditor? Name 133 W State St. Line 21 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Sycamore II 60178 Last 4 digits of account number \_\_\_\_ 4581\_\_\_\_ State Zip Code City Blitt and Gaines, PC, Bankruptcy Dept. On which entry in Part 1 or Part 2 list the original creditor? Line 21 of (Check one): Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave. Part 2: Creditors with Nonpriority Unsecured Claims Number Last 4 digits of account number \_\_\_\_\_4581 Wheeling 60090 State Zip Code Blitt and Gaines, PC, Bankruptcy Dept. On which entry in Part 1 or Part 2 list the original creditor? Line 22 of (Check one): Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave Part 2: Creditors with Nonpriority Unsecured Claims Number Wheeling IL 60090 Last 4 digits of account number \_\_\_\_ 4962 \_\_\_\_ State Zip Code DeKalb County Circuit Clerk, 17SC500 On which entry in Part 1 or Part 2 list the original creditor? Line 22 of (Check one): Part 1: Creditors with Priority Unsecured Claims 133 W State St. Part 2: Creditors with Nonpriority Unsecured Claims Number Last 4 digits of account number \_\_\_\_\_4962\_\_\_\_\_ 60178 State Zip Code City

Official Form 106E/F

Debtor 1 Oscar

Last Na

Part 4s Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                             |  |            | Total claim           |
|-----------------------------|--|------------|-----------------------|
| Total claims<br>from Part 1 | 6a. Domestic support obligations   | 6a.        | \$0.00                |
|                             | 6b. Taxes and Certain other debts you owe the government   | 6b.        | \$0.00                |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c.        | \$0.00                |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims.  Write that amount here.  | 6d.        | \$0.00                |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.   | 6e.        | \$0.00                |
|                             |  |            |                       |
|                             |  |            | Total claim           |
| Total claims<br>from Part 2 | 6f. Student loans  | 6f.        | <b>Total claim</b> \$ |
|                             | 6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims   | 6f.<br>6g. |                       |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority   |            | \$                    |
|                             | <ul> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other</li> </ul> | 6g.        | \$                    |

| Fill              | in this inf                     |   | 9 91729 Do   | oc 1                                | Filad 09/1/1/19             |                | ed 08/14/1<br>0 of 59 | .8 12:10:02         | Desc Main        |       |
|-------------------|---------------------------------|---|--|-------------------------------------|-----------------------------|----------------|-----------------------|---------------------|------------------|-------|
|                   |                                 |   | ,  |                                     |                             |                | 0 01 39               |                     |                  |       |
| Deb               | otor 1                          | Oscar   |  |                                     | Vega                        | -              |                       |                     |                  |       |
| Dak               | otor O                          | First Name  | Middle Name  |                                     | Last Name                   |                |                       |                     |                  |       |
|                   | otor 2<br>use, if filing)       | First Name  | Middle Name  |                                     | Last Name                   | -              |                       |                     |                  |       |
| Uni               | ted States                      | Bankruntey Court  | for the : <u>NORTHERN</u>  | District of                         | ILLINOIS                    |                |                       |                     |                  |       |
|                   |                                 |   | . <u>-                                   </u>                        | _ Diotriot or                       | (State)                     |                |                       |                     | Check if this is | s an  |
|                   | se Number                       |   |  |                                     | <u> </u>                    |                |                       |                     | amended filing   |       |
| Offic             | cial Fo                         | orm 1060  | <u> </u>   |                                     |                             |                |                       |                     |                  |       |
|                   |                                 |   |  | e and                               | Unexpired Lea               | 2626           |                       |                     |                  | 12/15 |
| nforma<br>additio | ation. If monal pages  you have | nore space is no<br>s, write your na<br>e any executory | eeded, copy the additi<br>me and case number<br>contracts or unexpir | onal page<br>(if known<br>ed leases | ?                           | entries, and a | attach it to this p   | age. On the top of  |                  |       |
|                   |                                 |   |  |                                     | h your other schedules. Y   |                |                       |                     |                  |       |
|                   | Yes. Fill                       | in all of the info                                      | rmation below even if  | the contra                          | cts or leases are listed in | Schedule A     | /B: Property (Offi    | cial Form 106A/B)   |                  |       |
| exa               |                                 | nt, vehicle lease                                       |  |                                     | ave the contract or lease   |                |                       |                     |                  |       |
| P<br>             | erson or                        | company with v  | whom you have the co   | ontract or                          | lease                       |                | State what            | the contract or lea | ase is for       |       |
| 2.1               | Carol Er                        | rickson   |  |                                     |                             | _              | Tenant                |                     |                  |       |
|                   | Name<br>905 E A                 | rnold Rd  |  |                                     |                             |                |                       |                     |                  |       |
|                   | Number                          | Street  |  |                                     |                             |                |                       |                     |                  |       |
|                   | Sandwic                         | :h  |  |                                     | 548                         | _              |                       |                     |                  |       |
| 22                | City                            |   |  | State Zip                           | o Code                      |                |                       |                     |                  |       |
| 2.2               | Name                            |   |  |                                     |                             | _              |                       |                     |                  |       |
|                   | Name                            |   |  |                                     |                             | _              |                       |                     |                  |       |
|                   | Number                          | Street  |  |                                     |                             |                |                       |                     |                  |       |
|                   | City                            |   |  | State Zip                           | o Code                      | _              |                       |                     |                  |       |
| 2.3               |                                 |   |  |                                     |                             |                |                       |                     |                  |       |
| 2.3               | Name                            |   |  |                                     |                             | _              |                       |                     |                  |       |
|                   | Name                            |   |  |                                     |                             | _              |                       |                     |                  |       |
|                   | Number                          | Street  |  |                                     |                             |                |                       |                     |                  |       |
|                   | City                            |   |  | State Zip                           | o Code                      | _              |                       |                     |                  |       |
|                   |                                 |   |  |                                     |                             |                |                       |                     |                  |       |
| 2.4               |                                 |   |  |                                     |                             | _              |                       |                     |                  |       |
|                   | Name                            |   |  |                                     |                             |                |                       |                     |                  |       |
|                   | Number                          | Street  |  |                                     |                             | _              |                       |                     |                  |       |
|                   | City                            |   |  | State Zip                           | o Code                      | _              |                       |                     |                  |       |
| 2.5               |                                 |   |  |                                     |                             |                |                       |                     |                  |       |
| ∪                 | Name                            |   |  |                                     |                             | _              |                       |                     |                  |       |
|                   | Number                          | Street  |  |                                     |                             | _              |                       |                     |                  |       |

State Zip Code

City

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any Additional Pages, write your name and case number (if known). Answer every question. |                    |  |                                |                     |  |  |  |  |
|--|--------------------|--|--------------------------------|---------------------|--|--|--|--|
| 1. <b>D</b>  | o you have any coo | ebtors? (If you are filing a joint                                       | case, do not list either spous | se as a codebtor.)  |  |  |  |  |
|  | No.                |  |                                |                     |  |  |  |  |
|  | Yes                |  |                                |                     |  |  |  |  |
|  | =                  | s, have you lived in a commur<br>aho, Lousiiana, Nevada, New M           |                                |                     | roperty states and territories include<br>Visconsin.)                            |  |  |  |
|  | No. Go to line 3.  |  |                                |                     |  |  |  |  |
|  | Yes. Did your sp   | ouse, former spouse, or legal ed   | uivalent live with you at the  | time?               |  |  |  |  |
|  | _                  | n community state or territory die                                       | d you live?                    | Fill in the n       | ame and current address of that person.  |  |  |  |
|  | Name of your spo   | use, former spouse or legal equivalent                                   |                                |                     |  |  |  |  |
|  | Number St          | reet   |                                |                     |  |  |  |  |
|  | City               |  | State                          | Zip Code            |  |  |  |  |
| 3 In   | -                  | f vour codebtors. Do not inclu   |                                | •                   | is filing with you. List the person  |  |  |  |
|  |                    | Form 106D), Schedule E/F (Off<br>edule G to fill out Column 2.<br>debtor | icial Form 106E/F), or Sche    | dule G (Official Fo | Column 2: The creditor to whom you owe the debt  Check all schedules that apply: |  |  |  |
| 3.1  |                    |  |                                |                     | Schedule D, line   |  |  |  |
|  | Name               |  |                                | _                   | Schedule E/F, line   |  |  |  |
|  | Number Stre        | et   |                                |                     | Schedule G, line   |  |  |  |
|  | City               | S  | tate Z                         | Zip Code            |  |  |  |  |
| 3.2  |                    |  |                                | _                   | Schedule D, line   |  |  |  |
|  | Name               |  |                                | _                   | Schedule E/F, line   |  |  |  |
|  | Number Stre        | et   |                                | _                   | Schedule G, line   |  |  |  |
|  | City               | S  | tate Z                         | Zip Code            | _  |  |  |  |
| 3.3  |                    |  |                                | _                   | Schedule D, line   |  |  |  |
|  | Name               |  |                                | _                   | Schedule E/F, line   |  |  |  |
|  | Number Stre        | et   |                                |                     | Schedule G, line   |  |  |  |
|  | City               | S  | tate Z                         | Zip Code            |  |  |  |  |

Official Form 106H Record # 758861 Schedule H: Your Codebtors Page 1 of 1

|                     |                      |                         | Document   | Paue 37 | 01 59                                       |
|---------------------|----------------------|-------------------------|------------|---------|---|
| Fill in this in     | formation to ident   | ify your case:          |            |         |   |
| Debtor 1            | Oscar                |                         | Vega       |         |   |
|                     | First Name           | Middle Name             | Last Name  |         |   |
| Debtor 2            |                      |                         |            |         |   |
| (Spouse, if filing) | First Name           | Middle Name             | Last Name  |         |   |
| United States       | Bankruptcy Court for | the:NORTHERN DISTRICT C | F ILLINOIS |         |   |
| Case Number         | r                    |                         |            |         | Check if this is:                           |
| (If known)          |                      |                         |            |         | An amended filing                           |
|                     |                      |                         |            |         | A supplement showing post-petition          |
|                     |                      |                         |            |         | chapter 13 income as of the following date: |
| Official E          | orm 106I             |                         |            |         |   |
| <u>Official F</u>   | 01111 1001           |                         |            |         | MM / DD / YYYY                              |
|                     |                      |                         |            |         |   |

### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Employment  |                                 |                                       |              |                                   |
|----|--|---------------------------------|---------------------------------------|--------------|-----------------------------------|
| 1. | Fill in your employment information  |                                 | Debtor 1                              |              | Debtor 2 or non-filing spouse     |
|    | If you have more than one job, attach a separate page with information about additional employers.   | Employment status               | X Employed Not employed               | 1            | Employed  Not employed            |
|    | Include part-time, seasonal, or self-employed work.  | Occupation                      | Customer Service                      | Rep          |                                   |
|    | Occupation may Include student or homemaker, if it applies.  | Employers name                  | Village of Montgo                     | mery         |                                   |
|    |  | Employers address               | 200 North River S<br>Montgomery, IL 6 |              | ,                                 |
|    |  | How long employed there?        | Since 7/1/2018                        |              |                                   |
| Pa | rt 2: Give Details About Monthl  | y Income                        |                                       |              |                                   |
|    | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse har lines below. If you need more space                              | ve more than one employer, comb | oine the information for a            | •            |                                   |
|    |  |                                 |                                       | For Debtor 1 | For Debtor 2 or non-filing spouse |
| 2. | <ol> <li>List monthly gross wages, salary and commissions (before all payroll<br/>deductions). If not paid monthly, calculate what the monthly wage would be.</li> </ol> |                                 |                                       | \$3,367.95   | \$0.00                            |
| 3. | 3. Estimate and list monthly overtime pay.   |                                 |                                       | \$0.00       | \$0.00                            |
| 4. | Calculate gross income. Add line   | e 2 + line 3.                   |                                       | \$3,367.95   | \$0.00                            |

 Official Form 106I
 Record # 758861
 Schedule I: Your Income
 Page 1 of 2

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 33 of 59

Debtor 1 Oscar

Oscar Document
Vega
First Name Middle Name Last Name

Case Number (if known) \_

|  |  |   |              | For Debtor 1             |       | For Debtor 2 or non-filing spouse |     |            |  |
|--|--|---|--------------|--------------------------|-------|-----------------------------------|-----|------------|--|
|  | Copy   | y line 4 here   | 4.           | \$3,367.95               |       | \$0.00                            |     |            |  |
| 5. <b>I</b>  | _ist all   | payroll deductions:   |              |                          |       |                                   |     |            |  |
|  | 5a. <b>T</b>   | ax, Medicare, and Social Security deductions  | 5a.          | \$672.86                 |       | \$0.00                            | )   |            |  |
|  | 5b. <b>N</b>   | Mandatory contributions for retirement plans  | 5b.          | \$151.56                 |       | \$0.00                            | )   |            |  |
|  | 5c. <b>V</b>   | oluntary contributions for retirement plans   | 5c.          | \$0.00                   |       | \$0.00                            | )   |            |  |
|  | 5d. <b>F</b>   | Required repayments of retirement fund loans  | 5d.          | \$0.00                   |       | \$0.00                            | )   |            |  |
|  | 5e. <b>I</b>   | nsurance  | 5e.          | \$111.37                 |       | \$0.00                            | )   |            |  |
|  | 5f. <b>C</b>   | Oomestic support obligations  | 5f.          | \$0.00                   |       | \$0.00                            | )   |            |  |
|  | 5g. <b>L</b>   | Inion dues  | 5g.          | \$0.00                   |       | \$0.00                            | )   |            |  |
|  | 5h. <b>C</b>   | Other deductions. Specify:  | 5h.          | \$0.00                   |       | \$0.00                            | )   |            |  |
| 6. <b>Add the payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.  |  |   | 6.           | \$935.78                 |       | \$0.00                            | )   |            |  |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4.   |  |   |              | \$2,432.17               |       | \$0.00                            | Ì   |            |  |
| 8. <b>L</b>  | ist all  | other income regularly received:  |              |                          |       | ·                                 |     |            |  |
|  | 8a.  | Net income from rental property and from operating a business,  |              |                          |       |                                   |     |            |  |
|  |  | profession, or farm   |              |                          |       |                                   |     |            |  |
|  |  | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total |              |                          |       |                                   |     |            |  |
|  |  | monthly net income.   | 8a.          | \$0.00                   |       | \$0.00                            |     |            |  |
|  | 8b.  | Interest and dividends  | 8b.          | \$0.00                   |       | \$0.00                            |     |            |  |
|  | 8c.  | Family support payments that you, a non-filing spouse, or a   | 8c.          | \$ 0.00                  |       | \$ 0.00                           |     |            |  |
|  |  | dependent regularly receive   |              |                          |       |                                   |     |            |  |
|  |  | Include alimony, spousal support, child support, maintenance, divorce   |              |                          |       |                                   |     |            |  |
|  |  | settlement, and property settlement.  |              |                          |       |                                   |     |            |  |
|  | 8d.  | Unemployment compensation   | 8d.          | \$0.00                   |       | \$0.00                            |     |            |  |
|  | 8e.  | Social Security   | 8e.          | \$0.00                   |       | \$0.00                            |     |            |  |
|  | 8f.  | Other government assistance that you regularly receive  | 8f.          | \$0.00                   |       | \$0.00                            |     |            |  |
|  |  | Include cash assistance and the value (if known) of any non-cash  |              |                          |       |                                   |     |            |  |
|  |  | assistance that you receive, such as food stamps (benefits under the  |              |                          |       |                                   |     |            |  |
|  |  | Supplemental Nutrition Assistance Program) or housing subsidies.  |              |                          |       |                                   |     |            |  |
|  |  | Specify:  |              |                          |       |                                   |     |            |  |
|  | 8g.  | Pension or retirement income  | 8g.          | \$0.00                   |       | \$0.00                            |     |            |  |
|  | 8h.  | Other monthly income. Specify:  | 8h.          | \$0.00                   |       | \$0.00                            |     |            |  |
| 9.   | Add  | <b>all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9.           | \$0.00                   |       | \$0.00                            | _   |            |  |
| 10.  |  | ulate monthly income. Add line 7 + line 9.  | 10.          | \$2,432.17               | + [   | \$0.00                            | =   | \$2,432.17 |  |
|  | Add  | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |              |                          |       |                                   |     |            |  |
| 11.  | State  | e all other regular contributions to the expenses that you list in Schedu   | ıle J.       |                          |       |                                   |     |            |  |
|  | Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and |   |              |                          |       |                                   |     |            |  |
|  |  | r friends or relatives.   | not ovoilabl | a ta nav avnanaga liatad | in C  | ahadula I                         |     |            |  |
|  |  | ot include any amounts already included in lines 2-10 or amounts that are<br>cify:  |              |                          | In Sc | meaule J.                         | 11. | \$0.00     |  |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.        |  |   |              |                          |       |                                   |     |            |  |
| Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies |  |   |              |                          |       |                                   |     |            |  |
| 13.  | 13. Do you expect an increase or decrease within the year after you file this form?                              |   |              |                          |       |                                   |     |            |  |
|  | \<br>\<br>\<br>\<br>\  | No.<br>Yes. Explain:  |              |                          |       |                                   |     |            |  |
|  | Ц  | r   |              |                          |       |                                   |     |            |  |
|  |  |   |              |                          |       |                                   |     | _          |  |

| Fill in this if  | ntormation to identify your ca  | ase:  |  |   |  |   |  |  |  |  |  |  |
|--|---|---|--|---|--|---|--|--|--|--|--|--|
| Debtor 1  Debtor 2 (Spouse, if filing)  United States  Case Numbe (If known) | Oscar  First Name  First Name  Bankruptcy Court for the :NO   | Middle Name  Middle Name  RTHERN DISTRICT OF                                    | Vega  Last Name  Last Name                                   |   | ded filing ment showing pos s of the following o | t-petition chapter 13<br>date:                        |  |  |  |  |  |  |
| (If Known)   |   |   |  | A separa  | te filing for Debtor                             | 2 because Debtor 2                                    |  |  |  |  |  |  |
| Official F   | Official Form 106J  A separate filing for Debtor 2 because Debtor 3 maintains a separate household. |   |  |   |  |   |  |  |  |  |  |  |
| Schedul  | le J: Your Expe   | nses  |  |   |  | 12/15   |  |  |  |  |  |  |
| more space is question.  |   |   | = =  | equally responsible for suppl<br>, write your name and case n     |  |   |  |  |  |  |  |  |
| 1. Is this a jo  |   |   | J.   |   |  |   |  |  |  |  |  |  |
| Do not li<br>Debtor 2  | have dependents? st Debtor 1 and c. tate the dependents'  |   | is information for   | Dependent's relationship to<br>Debtor 1 or Debtor 2<br>Daughter   | Dependent's age                                  | Does dependent live with you?  No  X Yes              |  |  |  |  |  |  |
| names.   |   |   |  | Daughter  | 14   | No X Yes X No Yes |  |  |  |  |  |  |
| expense  | expenses include<br>es of people other than<br>f and your dependents?                               | X No Yes  |  |   |  |   |  |  |  |  |  |  |
| Estimate your expenses as of the applicable Include expen                    | of a date after the bankruptcy  | uptcy filing date unles<br>y is filed. If this is a so<br>government assistance | upplemental <i>Schedule J</i> , choose if you know the value | s a supplement in a Chapter 1<br>eck the box at the top of the fo | orm and fill in                                  | Your expenses   |  |  |  |  |  |  |
| any rent   | tal or home ownership expent<br>for the ground or lot.<br>cluded in line 4:                         | nses for your residen   | ce. Include first mortgage pa                                | syments and   | 4.   | \$725.00  |  |  |  |  |  |  |
| 4a. Re   | eal estate taxes  |   |  |   | <b>4</b> a.                                      | \$0.00  |  |  |  |  |  |  |
| 4b. Pr   | operty, homeowner's, or rente   | er's insurance  |  |   | 4b.  | \$0.00  |  |  |  |  |  |  |
| 4c. Ho   | ome maintenance, repair, and  | upkeep expenses   |  |   | 4c.  | \$0.00  |  |  |  |  |  |  |
| 4d. Ho   | omeowner's association or co  | ndominium dues  |  |   | 4d.  | \$0.00  |  |  |  |  |  |  |
|  |   |   |  |   |  |   |  |  |  |  |  |  |

**Document** 

Debtor 1

Oscar

ent Page 35 of 59
Case Number (if known)

First Name Middle Name Last Name Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$0.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$200.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$500.00 7. 7. Food and housekeeping supplies \$20.00 8. 8. Childcare and children's education costs \$70.00 9. Clothing, laundry, and dry cleaning 10. \$50.00 Personal care products and services 10. \$30.00 11. Medical and dental expenses 11. \$244.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$20.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a. Life insurance \$0.00 15b. Health insurance 15b. \$100.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$455.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 758861 Schedule J: Your Expenses

Page 2 of 3

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 36 of 59

Oscar Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name \$5.00 21. Other. Specify: \_\_\_Postage/Bank Fees (\$5.00), 21. \$2,419.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$2,432.17 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$2,419.00 23b. Copy your monthly expenses from line 22 above. 23b.-\$13.17 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

 Official Form 106J
 Record #
 758861
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this in           | formation to iden    | tify your case:                       |                      |
|---------------------------|----------------------|---------------------------------------|----------------------|
| Debtor 1                  | Oscar                |                                       | Vega                 |
|                           | First Name           | Middle Name                           | Last Name            |
| Debtor 2                  | -                    |                                       |                      |
| (Spouse, if filing)       | First Name           | Middle Name                           | Last Name            |
| United States             | Bankruptcy Court for | r the : <u>NORTHERN</u> District of _ | ILLINOIS_<br>(State) |
| Case Number<br>(If known) | -                    |                                       | _                    |

## Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NOT an attorney t    | to help you fill out bankruptcy forms?  |
| No  |   |
| Yes. Name of Person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
|   |   |
| Under penalty of perjury, I declare that I have read the summar | y and schedules filed with this declaration and that they are true and                        |
| correct.  |   |
| 🗶 /s/ Oscar Vega  | ×   |
| Signature of Debtor 1   | Signature of Debtor 2   |
| Date _08/13/2018  | Date  |
| MM / DD / YYYY  | MM / DD / YYYY  |

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 38 of 59

|                     |                     |  | OCUITICIT           | I due 50 |
|---------------------|---------------------|--|---------------------|----------|
| Fill in this in     | formation to ider   | ntify your case:                       |                     |          |
| Debtor 1            | Oscar               |  | Vega                |          |
|                     | First Name          | Middle Name                            | Last Name           |          |
| Debtor 2            |                     |  |                     |          |
| (Spouse, if filing) | First Name          | Middle Name                            | Last Name           |          |
| United States       | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of _ | ILLINOIS<br>(State) |          |
| Case Number         | r                   |  | _                   |          |
| (II KIIOWII)        |                     |  |                     |          |

## Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| umber (if known). Answer every question.  |   |  |                |  |
|---|---|--|----------------|--|
| Part 1: Give Details About Your Marital Status and Where Y  | ou Lived Before                                 |  |                |  |
| 01. What is your current marital status?  |   |  |                |  |
| Married   |   |  |                |  |
| Not married   |   |  |                |  |
| 02 During the last 3 years, have you lived anywhere other that  | an where you live nov                           | v?   |                |  |
| No.   |   |  |                |  |
| Yes. List all of the places you lived in the last 3 years. D  | o not include where yo                          | ou live now.   |                |  |
| Debtor 1  | Dates Debtor 1<br>lived there                   | Debtor 2:  | Dates Debtor 2 |  |
| <ul> <li>Within the last 8 years, did you ever live with a spouse or property states and territories include Arizona, California, and Wisconsin.)</li> <li>No.</li> <li>Yes. Make sure you fill out Schedule H: Your Codebtors</li> </ul> | legal equivalent in a<br>, Idaho, Louisiana, Ne | community property state or territory? (Community evada, New Mexico, Puerto Rico, Texas, Washington, |                |  |
| Part 2: Explain the Sources of Your Income  |   |  |                |  |
|   |   |  |                |  |
|   |   |  |                |  |
|   |   |  |                |  |
|   |   |  |                |  |
|   |   |  |                |  |
|   |   |  |                |  |
|   |   |  |                |  |
|   |   |  |                |  |
|   |   |  |                |  |
|   |   |  |                |  |
|   |   |  |                |  |

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main

|                     | Oscar  |   | Document<br>Vega  | Page 39 of 59  | Number (if Impum)  |                                      |
|---------------------|--|---|---|--|--|--------------------------------------|
| r 1                 | First Name   | Middle Name   | Last Name   | Case   | Number (if known)  |                                      |
| Fill i              | n the total amount of in   | ncome you received f  | from all jobs and all business  | s during this year or the two p<br>es, including part-time activities<br>list it only once under Debtor 1.                         | S.   |                                      |
| ۱                   | · .  | ,   | ······································  |  |  |                                      |
|                     |  |   | Debtor 1  |  | Debtor 2   |                                      |
|                     |  |   | Sources of income<br>Check all that apply   | Gross income<br>(before deductions and   | Sources of income<br>Check all that apply                      | Gross income<br>(before deductions a |
|                     |  |   |   | exclusions)  | _  | exclusions)                          |
| -                   | From January 1 of cur  | rrent year until  | Wages, commissions,   | \$22,967   | Wages, commissions,  |                                      |
| 1                   | the date you filed for b   | bankruptcy:   | bonuses, tips  Operating a business   |  | bonuses, tips  Operating a business                            |                                      |
| ı                   | For last calendar year   | <del>.</del>  | Wages, commissions,   | \$33,896   | Wages, commissions,  |                                      |
| (                   | (January 1 to Decemb   | er 31, 2017)  | bonuses, tips  Operating a business   |  | bonuses, tips  Operating a business                            |                                      |
| _                   | For the calendar year  | hefore that:  | Wages, commissions,   | \$32,506   | Wages, commissions,  |                                      |
|                     | (January 1 to Decemb   |   | bonuses, tips   |  | bonuses, tips  |                                      |
| •                   | canaary 1 to 2000mis   | , 2010)   | Operating a business  |  | Operating a business   |                                      |
| nclu<br>and         | ide income regardless other public benefit pa  | of whether that incor<br>yments; pensions; re                         | ental income; interest; divider   | ther income are alimony; child sids; money collected from laws   | uits; royalties; and gambling                                  |                                      |
| nclu<br>and<br>winn | ide income regardless other public benefit pa ings. If you are filing a each source and the gr       | of whether that incor<br>yments; pensions; re<br>joint case and you h | me is taxable. Examples of o<br>ental income; interest; divider<br>lave income that you received                                  | ther income are alimony; child   | uits; royalties; and gambling<br>er Debtor 1.                  |                                      |
| ncluand vinn        | ide income regardless other public benefit pa ings. If you are filing a each source and the gr       | of whether that incor<br>yments; pensions; re<br>joint case and you h | me is taxable. Examples of o<br>ental income; interest; divider<br>lave income that you received                                  | ther income are alimony; child s<br>ids; money collected from laws<br>d together, list it only once unde                           | uits; royalties; and gambling<br>er Debtor 1.                  |                                      |
| ncluand vinn        | ide income regardless other public benefit pa<br>ings. If you are filing a<br>each source and the gi | of whether that incor<br>yments; pensions; re<br>joint case and you h | me is taxable. Examples of o ental income; interest; divider lave income that you received the source separately. Do not Debtor 1 | ther income are alimony; child sids; money collected from laws of together, list it only once under include income that you listed | uits, royalties, and gamblinger Debtor 1. in line 4.  Debtor 2 | g and lottery                        |
| ncluand vinn        | ide income regardless other public benefit pa<br>ings. If you are filing a<br>each source and the gi | of whether that incor<br>yments; pensions; re<br>joint case and you h | me is taxable. Examples of o<br>ental income; interest; divider<br>lave income that you received<br>ch source separately. Do not  | ther income are alimony; child s<br>ids; money collected from laws<br>d together, list it only once unde                           | uits, royalties, and gambling<br>er Debtor 1.<br>in line 4.    |                                      |

Case 18-81728 Doc 1

Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Page 40 of 59 Document Oscar Vega Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments GM Financial Po Box 181145 \$ 14,645 Monthly \$ 1,374 ■ Mortgage Car Arlington TX 76096 Credit card Loan repayment Suppliers or vendors Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment Include creditor's name payment

Part 4:

Identify Legal actions, Repossessions, and Foreclosures

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 41 of 59

|  |  | Vega   | Case Number (if known) _   |                          |
|--|--|--|--|--------------------------|
|  | First Name Middle Name   | Last Name                                      |  |                          |
| Lis  | thin 1 year before you filed for bankruptcy, we<br>t all such matters, including personal injury ca-<br>difications, and contract disputes.  |  |  | rt or custody            |
|  | No.  |  |  |                          |
|  | Yes. Fill in the details.  |  |  |                          |
|  |  | Nature of the case                             | Court or agency  | Status of the case       |
|  | Cavalry SPV I LLC v. Debtor 18sc635  | Breach of contract                             | Dekalb County  | Pending                  |
|  |  |  |  | On appeal                |
|  |  |  |  |                          |
|  |  |  |  | <b>_</b> _               |
|  |  |  |  | <del></del>              |
|  | Midland Funding Llc VS Oscar Vega  | Collection                                     | DeKalb County  | Pending                  |
|  | CASE NUMBER#17SC500  |  |  | On appeal                |
|  |  |  |  | Concluded                |
|  |  |  |  |                          |
|  |  |  |  | <del></del>              |
|  | Portfolio Recovery Assoc VS Oscar  | Collection                                     | DeKalb County  | Pending                  |
|  | Vega   |  |  |                          |
|  | CASE NUMBER#17SC1036   |  |  | Concluded                |
|  | <u> </u>   |  |  |                          |
|  |  |  |  |                          |
| Ch   | thin 1 year before you filed for bankruptcy, was eck all that apply and fill in the details below.  No. Go to line 11  | s any or your property repossess               | ea, toreciosea, garnisnea, attachea, seizea  | , or levied?             |
|  | Yes. Fill in the information below.  |  |  |                          |
|  | thin 90 days before you filed for bankruptcy,<br>refuse to make a payment because you owe  |  | ank or financial institution, set off any am   | ounts from your accounts |
|  | No. Go to line 11  |  |  |                          |
|  | Yes. Fill in the information below.  |  |  |                          |
|  | res. Fill III the information below.   |  |  |                          |
| Wit  | hin 1 year before you filed for bankruptcy, w<br>ırt-appointed receiver, a custodian, or anoth   |  | possession of an assignee for the benefit  | of creditors, a          |
| Wit  | hin 1 year before you filed for bankruptcy, w<br>ırt-appointed receiver, a custodian, or anoth<br>No.  |  | oossession of an assignee for the benefit  | of creditors, a          |
| Wit  | hin 1 year before you filed for bankruptcy, w<br>ırt-appointed receiver, a custodian, or anoth   |  | possession of an assignee for the benefit  | of creditors, a          |
| Wit  | hin 1 year before you filed for bankruptcy, w<br>urt-appointed receiver, a custodian, or anoth<br>No.<br>Yes.  |  | possession of an assignee for the benefit  | of creditors, a          |
| With col   | hin 1 year before you filed for bankruptcy, w<br>urt-appointed receiver, a custodian, or anoth<br>No.<br>Yes.  | er official?                                   |  | of creditors, a          |
| With cou   | hin 1 year before you filed for bankruptcy, wart-appointed receiver, a custodian, or anoth No.  Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy,   | er official?                                   |  | of creditors, a          |
| With col   | hin 1 year before you filed for bankruptcy, wart-appointed receiver, a custodian, or anoth No.  Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, No.   | er official?                                   |  | of creditors, a          |
| With column and the c | hin 1 year before you filed for bankruptcy, wart-appointed receiver, a custodian, or anoth No.  Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, No.  Yes. Fill in the details for each gift.  | er official?                                   | al value of more than \$600 per person?  |                          |
| Wife Cou   | hin 1 year before you filed for bankruptcy, wart-appointed receiver, a custodian, or anoth No.  Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy,  No.  Yes. Fill in the details for each gift. thin 2 years before you filed for bankruptcy,   | er official?                                   | al value of more than \$600 per person?  |                          |
| Wiff cou   | hin 1 year before you filed for bankruptcy, wort-appointed receiver, a custodian, or anoth No.  Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, No.  Yes. Fill in the details for each gift. thin 2 years before you filed for bankruptcy, No.  | er official?                                   | al value of more than \$600 per person?  |                          |
| Wiff cou   | hin 1 year before you filed for bankruptcy, wart-appointed receiver, a custodian, or anoth No.  Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy,  No.  Yes. Fill in the details for each gift. thin 2 years before you filed for bankruptcy,   | er official?                                   | al value of more than \$600 per person?  |                          |
| Wiff Cool  | hin 1 year before you filed for bankruptcy, wort-appointed receiver, a custodian, or anoth No.  Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, No.  Yes. Fill in the details for each gift. thin 2 years before you filed for bankruptcy, No.  Yes. Fill in the details for each gift.   | er official?                                   | al value of more than \$600 per person?  |                          |
| Wiff cou   | hin 1 year before you filed for bankruptcy, wort-appointed receiver, a custodian, or anoth No.  Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, No.  Yes. Fill in the details for each gift. thin 2 years before you filed for bankruptcy, No.  Yes. Fill in the details for each gift.   | er official?                                   | al value of more than \$600 per person?  |                          |
| Wife Cotton  | hin 1 year before you filed for bankruptcy, wort-appointed receiver, a custodian, or anoth No.  Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, No.  Yes. Fill in the details for each gift. thin 2 years before you filed for bankruptcy, No.  Yes. Fill in the details for each gift.   | er official?  did you give any gifts with a to | tal value of more than \$600 per person? Dutions with a total value of more than \$6 | 00 to any charity?       |
| Wife could be could b | hin 1 year before you filed for bankruptcy, wart-appointed receiver, a custodian, or anoth No. Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, No. Yes. Fill in the details for each gift. thin 2 years before you filed for bankruptcy, No. Yes. Fill in the details for each gift. List Certain Losses thin 1 year before you filed for bankruptcy o              | er official?  did you give any gifts with a to | tal value of more than \$600 per person? Dutions with a total value of more than \$6 | 00 to any charity?       |
| Wife could be could b | hin 1 year before you filed for bankruptcy, wort-appointed receiver, a custodian, or anoth No.  Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy,  No.  Yes. Fill in the details for each gift. thin 2 years before you filed for bankruptcy,  No.  Yes. Fill in the details for each gift.  List Certain Losses thin 1 year before you filed for bankruptcy ombling? | er official?  did you give any gifts with a to | tal value of more than \$600 per person? Dutions with a total value of more than \$6 | 00 to any charity?       |
| Wife could be could b | hin 1 year before you filed for bankruptcy, wort-appointed receiver, a custodian, or anoth No. Yes.  List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, No. Yes. Fill in the details for each gift. thin 2 years before you filed for bankruptcy, No. Yes. Fill in the details for each gift. List Certain Losses thin 1 year before you filed for bankruptcy ombling? No.   | er official?  did you give any gifts with a to | tal value of more than \$600 per person? Dutions with a total value of more than \$6 | 00 to any charity?       |

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 42 of 59

| Depto |  |                     | veya  | Case                                    | Number (if known)          |   |
|-------|--|---------------------|---|---|----------------------------|---|
|       | First Name   | Middle Name         | Last Name   |   |                            |   |
|       | consulted about seeking ba                               | inkruptcy or prep   | y, did you or anyone else acting on<br>paring a bankruptcy petition?<br>preparers, or credit counseling age   |   |                            | ne you                                  |
|       | No. Yes. Fill in the details                             |                     |   |   |                            |   |
|       | Party Contact Info                                       |                     | Description and value of  | any property transferred                | Date payme or transfer     | ent Amount of payment                   |
|       | Geraci Law L.L.C.  |                     | -   |   |                            | \$1,200.00                              |
|       | 55 E. Monroe Street #3                                   | 400                 |   |   |                            |   |
|       | Chicago,IL 60603   |                     |   |   |                            |   |
|       | Party Contact Info                                       |                     | Description and value of  | any property transferred                | Date payme or transfer     | ent Amount of payment                   |
|       | Hananwill Credit Couns                                   | seling              | Credit Counseling Services  | 3                                       | 2018                       | \$25.00                                 |
|       | 115 N. Cross St.   |                     |   |   |                            |   |
|       | Robinson, IL 62454                                       |                     |   |   |                            |   |
|       |  |                     |   |   |                            |   |
|       |  |                     |   |   |                            |   |
|       |  |                     |   |   |                            |   |
|       |  |                     |   |   |                            |   |
|       | -  | with your credito   | y, did you or anyone else acting on<br>rs or to make payments to your cre<br>you listed on line 16.   |   | sfer any property to anyo  | ne who                                  |
|       | No.  |                     |   |   |                            |   |
|       | Yes. Fill in the details.                                |                     |   |   |                            |   |
|       | transferred in the ordinary include both outright transf | course of your bu   | cy, did you sell, trade, or otherwise<br>usiness or financial affairs?<br>s made as security (such as the gra<br>lave already listed on this statemer | unting of a security inter              |                            | -                                       |
|       | No.  |                     |   |   |                            |   |
|       | Yes. Fill in the details for                             | each gift.          |   |   |                            |   |
| 19    | Within 10 years before you beneficiary? (These are ofto  | -                   | tcy, did you transfer any property trotection devices.)   | to a self-settled trust or s            | similar device of which y  | ou are a                                |
|       | No. Yes. Fill in the details for                         | each gift.          |   |   |                            |   |
| Pa    | List Certain Financia                                    | al Accounts, Instru | uments, Safe Deposit Boxes, and Sto   | rage Units                              |                            |   |
| 20    | sold, moved, or transferred                              | ?                   | y, were any financial accounts or in  | -                                       | · -                        |   |
|       | houses, pension funds, cod                               | = -                 | r other financial accounts; certifica<br>ciations, and other financial institut   | - · · · · · · · · · · · · · · · · · · · | n banks, credit unions, bi | окегаде                                 |
|       | No.  |                     |   |   |                            |   |
|       | Yes. Fill in the details.                                |                     | Last 4 digits of account number   | Type of account or instrument           | closed, sold, moved,       | Last balance before closing or transfer |
|       |  |                     |   |   | or transferred             |   |
|       |  |                     |   |   |                            |   |

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 43 of 59

| Debtor | r 1   | Oscar   | Vega   | Case Number (if known)   |                       |
|--------|-------|---|--|--|-----------------------|
|        |       | First Name Mid  | iddle Name Last Name   |  |                       |
|        | -     | you now have, or did you have<br>h, or other valuables?           | within 1 year before you filed for bankru  | ptcy, any safe deposit box or other depository for   | securities,           |
|        |       | No.   |  |  |                       |
|        |       | Yes. Fill in the details.   |  |  |                       |
|        |       |   | Who else had access to it?   | Describe the contents  | Do you still have it? |
| 22     | Hav   | re you stored property in a stor                                  | rage unit or place other than your home v  | within 1 year before you filed for bankruptcy?   |                       |
|        | =     | No.   |  |  |                       |
|        | Ц     | Yes. Fill in the details.   | Who else has or had access to it?  | Describe the contents  | Do you still have it? |
| Pa     | art 9 | Identify Property You Hold o                                      | or Control for Someone Else  |  |                       |
|        | -     | you hold or control any propert<br>someone.                       | ty that someone else owns? Include any   | property you borrowed from, are storing for, or ho   | old in trust          |
|        |       | No.   |  |  |                       |
|        |       | Yes. Fill in the details.   |  |  |                       |
|        |       |   | Where is the property?   | Describe the property  | Value                 |
| Pa     | rt 10 | Give Details About Environn                                       | mental Information   |  |                       |
| For    | the   | purpose of Part 10, the followin                                  | ng definitions apply:  |  |                       |
| ŀ      | haza  | ardous or toxic substances, was                                   |  | oncerning pollution, contamination, releases of<br>urface water, groundwater, or other medium,<br>es, wastes, or material. |                       |
|        |       | means any location, facility, or used to own, operate, or utilize |  | nental law, whether you now own, operate, or utiliz  | e                     |
|        |       |   | g an environmental law defines as a haza<br>Ilutant, contaminant, or similar term. | ardous waste, hazardous substance, toxic   |                       |
| Rep    | ort a | all notices, releases, and proce                                  | edings that you know about, regardless   | of when they occurred.   |                       |
| 24     | _     |   | d you that you may be liable or potentiall   | y liable under or in violation of an environmental l   | aw?                   |
|        |       | No. Yes. Fill in the details.                                     |  |  |                       |
|        | Ц     | res. Fill III the details.  | Governmental unit  | Environmental law, if you know it  | Date of notice        |
| 0.5    |       |   |  |  |                       |
| 25     | Hav   | e you notified any government                                     | tal unit of any release of hazardous mate  | rial?  |                       |
|        | =     | No.   |  |  |                       |
|        | Ц     | Yes. Fill in the details.   | Consequence and all similar  | Fundamental law Marca law 14   | Data of water         |
|        |       |   | Governmental unit  | Environmental law, if you know it  | Date of notice        |
| 26     | Hav   | e you been a party in any judic                                   | cial or administrative proceeding under a  | ny environmental law? Include settlements and or   | ders.                 |
|        |       | No.   |  |  |                       |
|        |       | Yes. Fill in the details.   |  |  |                       |
|        |       |   | Court or agency  | Nature of the case   | Status of the case    |
| Par    | rt 11 | Give Details About Your Bus                                       | siness or Connections to Any Business  |  |                       |
| 27     | Witl  | hin 4 years before you filed for                                  | bankruptcy, did you own a business or l  | have any of the following connections to any busin   | ness?                 |
|        |       |   | nployed in a trade, profession, or other a   |  |                       |
|        |       | =   | lity company (LLC) or limited liability par  |  |                       |
|        |       | A partner in a partnership  | ,  | • • •  |                       |
|        |       | =   | aging executive of a corporation   |  |                       |
|        |       | An owner of at least 5% of t                                      | the voting or equity securities of a corpo   | ration   |                       |
|        |       |   |  |  |                       |

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main

|          |  |                                 | Document                    | Page 44 of 59  |  |
|----------|--|---------------------------------|-----------------------------|--|--|
| ebtor 1  | Oscar  |                                 | Vega                        | Case Number (if known)                                     |  |
|          | First Name                                     | Middle Name                     | Last Name                   |  |  |
|          | No. None of the abo                            | ove applies. Go to Part 12.     |                             |  |  |
|          | Yes. Check all that a                          | apply above and fill in the def | tails below for each busine | ess.   |  |
|          |  |                                 |                             |  |  |
|          | thin 2 years before y<br>titutions, creditors, |                                 | you give a financial stat   | ement to anyone about your business? Include all financial |  |
|          | No.  |                                 |                             |  |  |
| _        | Yes. Fill in the detai                         | le                              |                             |  |  |
| ш        | res. i ili ili tile detai                      | Date is                         | hauz                        |  |  |
| B . 4.4  |  | 240 10                          |                             |  |  |
| Part 12  | Sign Below                                     |                                 |                             |  |  |
| <b>x</b> | .S.C. §§ 152, 1341, 1<br>/s/ Oscar Vega        | 0.0, and 007 1.                 | ×                           |  |  |
| ••       | Signature of Debtor                            | · 1                             |                             | ture of Debtor 2   |  |
|          |  |                                 |                             |  |  |
|          | Date 08/13/2018                                |                                 | Date                        |  |  |
|          | MM / DD /                                      | YYYY                            | Date                        | MM / DD / YYYY   |  |
|          |  |                                 |                             |  |  |
| Did v    | vou attach additiona                           | I pages to Your Statement       | of Financial Affairs for In | dividuals Filing for Bankruptcy (Official Form 107)?       |  |
|          | •  |                                 |                             | , , , ,  |  |
|          | No   |                                 |                             |  |  |
|          | Yes  |                                 |                             |  |  |
| Did      | ou pay or agree to                             | pay someone who is not an       | attorney to help you fill   | out bankruptcy forms?                                      |  |
|          | No   |                                 |                             |  |  |
|          | Yes. Name of perso                             | n                               |                             | Attach the Bankruptcy Petition Preparer's Notice,          |  |

Declaration, and Signature (Official Form 119).

| Fill in this infor        | Caso 19 91729 Doc 1 Filod mation to identify your case:                             | L08/14/18 Entered 08/14/18 12:10:0<br>5 of 59                   | 2 Desc Main   |
|---------------------------|---|---|---|
| Dahara C                  | Oscar   | Vega  |   |
|                           | st Name Middle Name   | Last Name   |   |
| Debtor 2                  |   |   |   |
| (Spouse, if filing) Fire  | st Name Middle Name   | Last Name   |   |
| United States Ban         | nkruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOI</u>                 |   | _   |
| Case Number<br>(If known) |   | (State)   | Check if this is an amended filing                  |
| Official For              | <u>m 108</u>  |   |   |
| Statement                 | of Intention for Individuals F  | iling Under Chapter 7   | 12/1  |
| _                         | dual filing under chapter 7, you must fill out this fo                              | rm if:  |   |
|                           | laims secured by your property, or personal property and the lease has not expired. |   |   |
| -                         |   | r bankruptcy petition or by the date set for the meeting of cr  | reditors,   |
| whichever is earlie       | r, unless the court extends the time for cause. You                                 | must also send copies to the creditors and lessors you list.    |   |
|                           | ole are filing together in a joint case, both are equal                             | lly responsible for supplying correct information.              |   |
|                           | sign and date the form.   | tach a congrete chart to this form. On the top of any addition  | and magan   |
| -                         | u accurate as possible. Il more space is needed, at<br>nd case number (if known).   | tach a separate sheet to this form. On the top of any addition  | iai pages,  |
|                           | Your Creditors Who Have Secured Claims  |   |   |
| rait ii                   |   | s Who Have Claims Secured by Property (Official Form 106D       | )), fill in the                                     |
| information bel           | -   |   | ,,  |
| Identify the cre          | ditor and the property that is collateral   | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| Creditor's                |   | ☐ Surrender the property  | П №   |
| name:                     | GM Financial  | Retain the property and redeem it                               | ■ Yes   |
| Description of            | of 2013 Chevrolet Malibu with over 91,000 miles                                     | Retain the property and enter into a                            | Tes   |
| property                  |   | Reaffirmation Agreement.  |   |
| securing deb              | ot:   | Retain the property and [explain]:                              | _   |
|                           |   |   | <u> </u>  |
| Creditor's                |   | ☐ Surrender the property  | ☐ No  |
| name:                     |   | Retain the property and redeem it                               | Yes   |
| Description of            | of  | Retain the property and enter into a                            | _   |
| property                  |   | Reaffirmation Agreement.  |   |
| securing deb              | vt:   | Retain the property and [explain]:                              |   |
| Creditor's                |   | Surrender the property  |   |
| name:                     |   | Retain the property and redeem it                               | Yes   |
| Description of            | of  | Retain the property and enter into a                            |   |
| property                  |   | Reaffirmation Agreement.  |   |
| securing deb              | ot:   | Retain the property and [explain]:                              | _   |
| Creditor's                |   | Surrender the property  |   |
| name:                     |   | Retain the property and redeem it                               | ☐ Yes   |
| Description               |   | Retain the property and enter into a                            | □ 169   |
| Description of property   | וע  | Reaffirmation Agreement.  |   |
| securing deb              | ot:   | Retain the property and [explain]:                              | _   |

Oscar

Case 18-81728

Doc 1

Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Page 46 of 5 gumber (if known)

First Name Middle Name Document Last Name

| Part 2: | List Your Unexpired Personal Property | Leases |
|---------|---------------------------------------|--------|
|---------|---------------------------------------|--------|

| For any unexpired personal property lease that you   | listed in Schedule G: Executory Contracts and Unexpired Leas        | ses (Official Form 106G),  |
|--|---|----------------------------|
| fill in the information below. Do not list real estate I   | eases. Unexpired leases are leases that are still in effect; the le | ase period has not yet     |
| ended. You may assume an unexpired personal pro  | operty lease if the trustee does not assume it. 11 U.S.C. § 365(p)  | (2).                       |
| Describe your unexpired personal property leas   | ees   | Will the lease be assumed? |
| Lessor's name: Carol Erickson  |   | No                         |
| Description of leased property:  |   | Yes                        |
| Lessor's name:   |   | □ No                       |
| Description of leased property:  |   | Yes                        |
| Lessor's name:   |   | □ No                       |
| Description of leased property:  |   | Yes                        |
| Lessor's name:   |   | □ No                       |
| Description of leased property:  |   | Yes                        |
| Lessor's name:   |   | □ No                       |
| Description of leased property:  |   | ☐ Yes                      |
| Lessor's name:   |   | □ No                       |
| Description of leased property:  |   | ∐ Yes                      |
| Lessor's name:   |   | □ No                       |
| Description of leased property:  |   | ☐ Yes                      |
| Part 3: Sign Below   |   |                            |
| Under penalty of perjury, I declare that I have indicat<br>personal property that is subject to an unexpired lea | ed my intention about any property of my estate that secures a se.  | debt and any               |
| ★ /s/ Oscar Vega  Signature of Debtor 1  | Signature of Debtor 2   | _                          |
| Date Dated: 08/13/2018  MM / DD / YYYY   | Date  |                            |

Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Case 18-81728 Document Page 47 of 59

B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

| In re | e  |  |      |
|-------|--|--|------|
| Osca  | ar Vega / Debtor   | Case No:   |      |
|       |  | Chapter: Chapter 7   |      |
|       | DISCLOSURE   | OF COMPENSATION OF ATTORNEY FOR DEBTOR   |      |
| com   | pensation paid to me within one year before the f  | P. 2016(b), I certify that I am the attorney for the above named debtor(s) and iling of the petition in bankruptcy, or agreed to be paid to me, for services n contemplation of or in connection with the bankruptcy case is as follows: | that |
|       | For legal services, I have agreed to accept  | \$1,200.00   |      |
|       | Prior to the filing of this statement I have receive   | ed <b>\$1,200.00</b>   |      |
|       | Balance Due  | \$0.00   |      |
| 2.    | The source of the compensation paid to me was:   |  |      |
|       | Debtor(s) Other: (specify)   |  |      |
| 3.    | The source of compensation to be paid to me is:  |  |      |
|       | Debtor(s) Other: (specify)   |  |      |
| 4.    | other. (speeny)  | sed compensation with any other person unless they are members and associat  | es   |
| [     | of my law firm. A copy of the agreement, t attached.   | compensation with a other person or persons who are not members or associate ogether with a list of the names of the people sharing in the compensation, is  | es   |
| 5.    | In return for the above-disclosed fee, I have agre case, including:                                | ed to render legal service for all aspects of the bankruptcy   |      |
|       | a. Analysis of the debtor's financial situation, bankruptcy;                                       | and rendering advice to the debtor in determining whether to file a petition in  |      |
|       | b. Preparation and filing of any petition, sched   | ules, statements of affairs and plan which may be required;  |      |
|       | By agreement with the debtor(s), the above-discl<br>Fee does NOT include any work done post-filing |  |      |
|       |  | CERTIFICATION  |      |
|       |  | omplete statement of any agreement or arrangement for the debtor(s) in this bankruptcy proceedings.  |      |
|       | Date: 08/14/2018   | /s/ Alex Wilson  |      |
|       | Date   | Signature of Attorney  |      |
|       |  | Geraci Law L.L.C. Name of law firm   |      |

758861 Page 1 of 1 Record #

Case 18-81728 Geragi Lawel 66/14/ligois Indiana 6/154018/12:10:02 Desc Main Headquarters: 55 E. Monroe Street, #3400 Chicago, II 60603 8669250708 OCHENT CORNER WWW.INFOTAPES.COM

Date: 1/22/2018

Consultation Attorney: ALX

Record'#: **758-861** 

## Retainer Agreement Chapter 7 - Pre-filing

| - 1 |  |
|-----|--|
| •   | Services before filing in Court: I retain Geraci Law L.L.C. to prepare to file a Chapter 7 bankruptcy petition in court. I agree to pay, by debit only, a flat fee for services before filing in court of \$ 1,200.00 at \$ { } today, \$ { } toda |
|     | not you sign a post-filing agreement is entirely voluntary: you are not required to retain Geraci Law for post-bankruptcy services. We will not withdraw for non-payment if you decide not to sign a post-filing agreement, reimburse the \$335 we paid for you, or fees. We will attend your meeting of creditors and perform ministerial tasks, but you may have to retain someone else for anything not included in the post-filing fee (read next paragraph for what is included)  |
|     | The flat fee for pre-filing work pays for: consultation after hiring us, (before retaining us is free) preparation petition, phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email attachments, web uploads and mail; office appointment to review and sign your petition; filing your case in court. Excluded: appearance in any court or proceeding; taking calls from your creditors or bill collectors. If you decide to pre-pay, or pay for ALL services before and after we file your case in court, all work until case closing is included except: missed section 341 meetings; amendments to schedules; adversary proceedings; any motions including to reopen, avoid judgment liens, for enlargement of time; any contested matter including but not limited to objections to exemptions, motions to dismiss; attending rule 2004 examinations; reviewing documents that we did not specifically request from you; appearance other than bankruptcy court. With "flat fee", rather than hourly, you know in advance your entire cost unless additional work is required and it usually is cheaper, but you may choose to pay for our services billed hourly at \$75 -\$450/hour, and pay in advance a security retaier, which may cost you more, or less than a flat fee. Advance Payment Retainer. Payments on flat fee or hourly become our property on payment and are deposited into our operating account, not into a client trust account. We will only refund unearned fees You may enter into a security retainer agreement with another law firm: we will not because you may lose funds held in our trust account which may be assets in a Chapter 7.  |
|     | <b>Termination</b> . If you decide not to proceed, delay, fail to respond, fail to pay my attorneys or provide all information & sign my petition according to this schedule, I agree that Geraci Law may discontinue work and charge me for the work done to date at hourly rates shown above. We will only refund fees not earned. <b>Wisconsin</b> : We will submit any unresolved dispute about the fee to binding arbitration within 30 days of receiving written notice of the dispute. You may file a claim with the Wisconsin Lawyers' Fund for Client Protection if the we fail to provide a refund of unearned advanced fees. If you dispute the amount of the fee and want that dispute to be submitted to binding arbitration, you must provide written notice of the dispute to Geraci Law within 30 days of the mailing of the accounting. If we are unable to resolve the dispute to the satisfaction of you within 30 days after notice of the dispute from the client, we shall submit the dispute to binding arbitration.  |
|     | Time matters: You agree: to fully cooperate with us and provide all information required; use Client Corner and not to cause excessive work; that more than one attorney or staff will work on your file there is no extra charge for the entire Geraci Law Team, unlike single attorney "law firms". Change in circumstances: This flat fee is based on the facts you told us. If that changes, your fee may change. Exemption laws only protect a limited amount of property. File Chapter 13 if you have property not claimed as exempt, or risk turn over "non-exempt" property to a Trustee. No guarantee of Discharge: Creditors or others may object to a chapter 7 discharge of certain debts or to any discharge, for a variety of reasons. Debts not discharged: student loans; educational debts and tuition; most tax debts; undisclosed debts; maintenance or support; fines; fraud, stealing or intentional injury claims, debts after filing including HOA dues; other debts listed in your green folder as usually not discharged. No discharge if you don't take the 2nd educational course. I will not transfer or acquire any property or incur any credit or debt before filing, and I must make full disclosure of all income, expenses, debts and assets on my bankruptcy petition as of the date I sign it. I AGREE TO READ EVERY PAGE AND EVERY LINE OF MY PETITION BEFORE I SIGN IT AND TO MAKE SURE THAT IT IS COMPLETE AND CORRECT.   |
| D   | rate: 74 18 x 0000 X (Joint Debtor)  |
| Χ   | Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 171110  |

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 49 of 59

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

In re

| Oscar Vega / Debtor | Bankruptcy Docket #: |
|---------------------|----------------------|
|                     | Judge:               |

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 08/13/2018 /s/ Oscar Vega X Date & Sign

Oscar Vega

\* Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Document Vega / Debtor

Entered 08/14/18 12:10:02 Desc Main Page 50 of 59

#### B 201A (Form 201A) (11/11)

## UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

B 201A (Form 201A) (11/11) 758861 Page 1 of 2 Record #

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document

Form B 201A, Notice to Consumer Debtor(s)

In re Oscar

Page 51 of 59

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 08/13/2018 | /s/ Oscar Vega        |   |
|-------------------|-----------------------|---|
|                   | Oscar Vega            |   |
| Dated: 08/14/2018 | /s/ Alex Wilson       |   |
|                   | Attorney: Alex Wilson | _ |

## Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 52 of 59

| Debtor 1                                | Oscar  | Vega   | Case Number (if i  | known)  |
|---|--|--|--|---|
| ,                                       | First Name   | Middle Name Last Name  |  |   |
|   |  |  |  |   |
| Part                                    | 6: Answer These Question                           | s for Reporting Purposes   |  |   |
|   | What kind of debts do                              | 16a. Are your debts primarily of as "incurred by an individual p   | consumer debts? Consumer debts are def<br>rimarily for a personal, family, or household p              | fined in 11 U.S.C. § 101(8)<br>purpose."                            |
| 3                                       | you have?  | No. Go to line 16b. Yes. Go to line 17.  |  |   |
|   |  | 16b. Are your debts primarily it   | business debts? Business debts are debts strent or through the operation of the busines                | s that you incurred to obtain<br>ss or investment.                  |
|   |  | No. Go to line 16c. Yes. Go to line 17.  |  |   |
|   |  | 16c. State the type of debts you ov  | we that are not consumer debts or business d   | lebts.  |
|   |  |  |  |   |
|   | Are you filing under<br>Chapter 7?                 | ☐ No. I am not filing under Cha  | apter 7. Go to line 18.  | ,   |
|   | Do you estimate that after                         | Yes. I am filing under Chapte  | er 7. Do you estimate that after any exempt p<br>s are paid that funds will be available to distrit    | property is excluded and bute to unsecured creditors?               |
|   | any exempt property is                             | No.  |  |   |
|   | excluded and administrative expenses               | Yes.   |  |   |
|   | are paid that funds will be                        |  |  |   |
|   | available for distribution to unsecured creditors? |  |  |   |
|   | How many creditors do                              | <b>I</b> 1-49  | 1,000-5,000  | 25,001-50,000   |
|   | you estimate that you                              | ☐ 50-99  | <b>5</b> ,001-10,000   | 50,001-100,000  |
|   | owe?   | 100-199  | <b>1</b> 0,001-25,000  | ☐ More than 100,000   |
|   |  | □ 200-999  |  |   |
| 19.                                     | How much do you                                    | \$0-\$50,000   | \$1,000,001-\$10 million   | □\$500,000,001-\$1 billion<br>□\$1,000,000,001-\$10 billion         |
|   | estimate your assets to be worth?                  | □ \$50,001-\$100,000<br>□ \$100,001-\$500,000  | ☐ \$10,000,001-\$50 million<br>☐ \$50,000,001-\$100 million  | \$10,000,000,001-\$50 billion                                       |
| -                                       | De Wolten  | \$500,001-\$1 million  | □ \$100,000,001-\$500 million  | ☐More than \$50 billion   |
| 20.                                     | How much do you                                    | <b>□</b> \$0-\$50,000  | ☐ \$1,000,001-\$10 million   | □\$500,000,001-\$1 billion  |
| 20.                                     | estimate your liabilities                          | \$50,001-\$100,000   | ☐ \$10,000,001-\$50 million  | \$1,000,000,001-\$10 billion  |
|   | to be?   | \$100,001-\$500,000  | \$50,000,001-\$100 million   | \$10,000,000,001-\$50 billion                                       |
|   |  | ■ \$500,001-\$1 million  | □ \$100,000,001-\$500 million  | · ☐ More than \$50 billion  |
| Par                                     | t 7: Sign Below                                    |  |  |   |
| For                                     | you  | I have examined this petition, and correct.  | I declare under penalty of perjury that the info   | ormation provided is true and                                       |
|   |  | If I have chosen to file under Chap<br>of title 11, United States Code. I un<br>under Chapter 7.             | oter 7, I am aware that I may proceed, if eligib<br>nderstand the relief available under each cha      | ile, under Chapter 7, 11,12, or 13<br>pter, and I choose to proceed |
| *************************************** |  | If no attorney represents me and I this document, I have obtained an   | did not pay or agree to pay someone who is d read the notice required by 11 U.S.C. § 342               | not an attorney to help me fill out<br>2(b).                        |
| *************************************** |  | I request relief in accordance with  | the chapter of title 11, United States Code, s   | pecified in this petition.  |
|   |  | I understand making a false stater<br>with a bankruptcy case can result<br>18 U.S.C. §§ 152, 1341, 1519, and | ment, concealing property, or obtaining mone; in fines up to \$250,000, or imprisonment for td d 3571. | y or property by fraud in connection<br>up to 20 years, or both.    |
|   |  | Signature of Debtor 1  | √wa × sign   | ature of Debtor 2   |
|   |  | Executed on : 8 / 1  | 3/2018 Exec  | cuted on  |

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 53 of 59

|  |                            |                             | Document 1                    | ago oo oi oo                                 |  |
|--|----------------------------|-----------------------------|-------------------------------|--|--|
| Fill in this i   | nformation to identify y   | our case:                   |                               |  |  |
|  |                            |                             | V                             |  |  |
| Debtor 1   | Oscar                      | Middle Name                 | Vega<br>Last Name             |  | •  |
|  | First Name                 | Middle Name                 | LES RUITO                     |  |  |
| Debtor 2<br>(Spouse, if filing)  | First Name                 | Middle Name                 | Last Name                     |  |  |
| United State   | s Bankruptcy Court for the | NORTHERN District           | of ILLINOIS                   |  |  |
| Case Number  |                            |                             | (State)                       |  | Check if this is an                          |
| (if known)   | ı                          |                             | <del></del>                   |  | amended filing                               |
| L  |                            |                             |                               | ····   | amondou ming                                 |
|  |                            |                             |                               |  |  |
|  |                            |                             |                               |  |  |
| Official F   | orm 106 Dec                |                             |                               |  |  |
|  |                            |                             |                               | <b>*</b> *                                   |  |
| Declara  | tion About a               | n Individual                | Debtor's Sche                 | dules  | 12/15  |
|  |                            |                             | esponsible for supplying co   | rrect information                            |  |
|  |                            |                             |                               |  |  |
| You must file  | this form whenever you     | ı file bankruptcy sched     | dules or amended schedule     | s. Making a false statement, c               | oncealing property, or                       |
| obtaining mor  | ey or property by frau     | d in connection with a      | bankruptcy case can result    | in fines up to \$250,000, or im              | prisonment for up to 20                      |
| years, or both   | . 18 U.S.C. §§ 152, 1341   | , 1519, and 3571.           |                               |  |  |
|  |                            | •                           |                               |  |  |
|  | Sign Below                 |                             |                               |  |  |
|  |                            |                             |                               |  |  |
| Did you pa   | y or agree to pay some     | eone who is NOT an att      | torney to help you fill out b | ankruptcy forms?                             |  |
| ■ No   |                            |                             |                               |  |  |
|  |                            |                             |                               |  | now D. L. M. C. D. James and                 |
| Yes.   | Name of Person             |                             | ·                             | Attach Bankruptcy F<br>Signature (Official F | Petition Preparer's Notice, Declaration, and |
|  |                            |                             |                               | Signature (Omotal 1                          | um 110).                                     |
|  |                            |                             |                               |  |  |
|  |                            |                             |                               |  |  |
|  |                            | •                           |                               |  |  |
| ACCOUNT AND A STATE OF |                            | to a contract of the second |                               |  |  |
|  |                            |                             |                               |  |  |
|  |                            |                             |                               | d with this declaration and th               | at they are true and                         |
|  | alty of perjury, I declar  | e that I have read the s    | summary and schedules file    | ed with this declaration and th              | at they are true and                         |
| Under per  | alty of perjury, I declar  | e that I have read the s    | summary and schedules file    | d with this declaration and th               | at they are true and                         |
|  | alty of perjury, I declar  | e that I have read the s    | summary and schedules file    | d with this declaration and th               | at they are true and                         |
|  | alty of perjury, I declar  | e that I have read the s    | summary and schedules file    | d with this declaration and th               | at they are true and                         |

Date MM / DD / YYYY

## Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 54 of 59

| Debtor 1              | Oscar  |   | Vega   | Case Number (if known)  | <del>-</del> |
|-----------------------|--|---|--|---|--------------|
| Jepitor 1             | First Name   | Middle Name   | Last Name  |   |              |
| ins                   | hin 2 years before you filed<br>titutions, creditors, or other<br>No.<br>Yes. Fill in the details.                                       | for bankruptcy, did y<br>parties.                     | ou give a financial statement to   | anyone about your business? Include all financial   |              |
|                       |  | Date issu   | led  |   |              |
| Part 12               | Sign Below   |   |  |   |              |
| ansv<br>in cc<br>18 U | vers are true and correct. I to connection with a bankruptcy s.C. §§ 152, 1341, 1519, and Signature of Debtor 1  Date     MM / DD / YYYY | inderstand that making case can result in fired 3571. | ng a false statement, concealing as up to \$250,000, or imprison  Signature of I | DD / YYYY   |              |
| Did                   | you attach additional pages  | to Your Statement o                                   | f Financial Affairs for Individua  | ls Filing for Bankruptcy (Official Form 107)?   |              |
|                       | No<br>Yes  |   | was well aut ball you fill out ball  | kruptev forme?  |              |
| Did                   | you pay or agree to pay so   | neone wno is not an :                                 | attorney to help you fill out ban  | niuptoy ioniio.   |              |
|                       | No<br>Yes. Name of person  |   |  | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |              |

Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Case 18-81728

Page 55 of 59 Document Case Number (if known) \_\_ Vega Oscar Debtor 1 Last Name Middle Name

| any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Un in the information below. Do not list real estate leases. Unexpired leases are leases that are still in | effect; the lease period has not yet |
|---|--------------------------------------|
| ed. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.  | S.C. § 365(p)(2).                    |
| Describe your unexpired personal property leases  | Will the lease be assumed?           |
| _essor's name: Carol Erickson   | □ No                                 |
| Description of leased property:   | Yes .                                |
| Lessor's name:  | □ No                                 |
| Description of leased property:   | ☐ Yes                                |
| Lessor's name:  | ☐ No                                 |
| Description of leased property:   | Yes                                  |
| Lessor's name:  | □ No                                 |
| Description of leased property:   | ☐ Yes                                |
| Lessor's name:  | ☐ No                                 |
| Description of leased property:   | ☐ Yes                                |
| Lessor's name:  | ☐ No                                 |
| Description of leased property:   | ☐ Yes                                |
| Lessor's name:  | □ No                                 |
| Description of leased property:   | ☐ Yes                                |
| Part 3: Sign Below  |                                      |
| der penalty of perjury, I declare that I have indicated my intention about any property of my estate sonal property that is subject to an unexpired lease.  | that secures a debt and any          |
| Signature of Debtor 1  Date Dated: / 3 /20  Date MM / DD / YYYY   |                                      |

First Name

### Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main

## DISCLAIMER BERKors Have read fand agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

  (1) The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others. e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis
  Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have
  decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each
  other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK & MAKE SURE OUR PETITION IS ACCURATE!!!

Dated: 2 /2018 Dated:

X Date & Sign

Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 57 of 59

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

in re

Oscar Vega / Debtor

Bankruptcy Docket #:

Judge:

## VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Dated: 8 / 13 /2018

Oscar Vega

Declare under Penalty of Perjury that the foregoing is true and correct.

X Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

## Case 18-81728 Doc 1 Filed 08/14/18 Entered 08/14/18 12:10:02 Desc Main Document Page 58 of 59

| Debtor 1                               | Oscar   |  | Vega  | Case I            | Number (if knov                                     | vn)    |                                     |             |  |
|--|---|--|---|-------------------|---|--------|-------------------------------------|-------------|--|
|  | First Name                                    | Middle Name  | Last Name   |                   |   |        |                                     |             | ****   |
|  |   |  |   | Colur<br>Debte    | 255 x 26 20 46 56 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 |        | Column B Debtor 2 or non-filing spo | iuse        | ***************************************  |
|  |   |  |   |                   | \$0.00  |        | \$0.                                | .00         | ***************************************  |
|  | mployment compe                               | nsation<br>t if you contend that the amount recei  | ved was a benefit                                   |                   | Ψ0.00   |        |                                     | <del></del> | ***************************************  |
| unde                                   | er the Social Securit                         | ty Act. Instead, list it here:   |   |                   |   |        |                                     |             | NO CONTRACTOR CONTRACT |
|  |   |  |   |                   |   |        |                                     |             | ***************************************  |
|  |   |  |   |                   |   |        |                                     |             | ***************************************  |
| ben                                    | efit under the Socia                          | • •  |   |                   | \$0.00  |        | \$0                                 | .00         | u-uu-uu-uu-uu-uu-uu-uu-uu-uu-uu-uu-uu-u  |
| Do<br>as a                             | not include any ben<br>a victim of a war crir | sources not listed above. Specify the<br>efits received under the Social Securine, a crime against humanity, or inter<br>list other sources on a separate page | ty Act or payments received<br>national or domestic |                   |   |        |                                     |             |  |
|  | -   |  | , and par the total en line                         |                   | \$0.00  |        | \$ 0.0                              | 0           |  |
|  |   |  |   | \$                | 0.00  |        | \$0                                 | .00         |  |
|  |   | n separate pages, if any.  |   |                   | \$0.00  |        | \$0                                 | .00         |  |
| 11 Cal                                 | culate vour total ci                          | urrent monthly income. Add lines 2 to<br>total for Column A to the total for Colu  | nrough 10 for each<br>mn B.                         |                   | \$3,210.94  | +      | \$0.                                | .00] = [    | \$3,210.94   |
|  |   |  |   |                   |   |        |                                     |             |  |
| Part 2                                 | Determine V                                   | Whether the Means Test Applies to You  | •   |                   |   |        |                                     |             | ***************************************  |
|  |   | t monthly income for the year. Follo   |   |                   |   |        |                                     |             |  |
| 12. Cai                                | . Copy your total                             | current monthly income from line 11  |   | Сор               | y line 11 here                                      | :      | 1:                                  | 2a.         | \$3,210.94   |
|  | Multiply by 12 (th                            | ne number of months in a year).  |   |                   |   |        |                                     |             | x 12   |
| <b>1</b> 2b                            | . The result is you                           | ır annual income for this part of the fo   | rm.   |                   |   |        | 1                                   | 2b.         | \$38,531.28  |
| 13. <b>Ca</b> l                        | culate the median                             | family income that applies to you. F   | ollow these steps:                                  |                   |   |        |                                     |             |  |
| Fill                                   | in the state in which                         | h you live.  | IL  |                   |   |        |                                     |             |  |
| Fill                                   | in the number of pe                           | eople in your household.   | 3   |                   |   |        |                                     |             |  |
|  |   | ly income for your state and size of ho  |   |                   |   |        |                                     | 13.         | \$80,233.00  |
| Т.                                     | find a list of applica                        | ly income for your state and size of no<br>ible median income amounts, go onlir<br>m. This list may also be available at th                                    | e using the link specified in the s                 | separate          |   |        |                                     | L           | <b>,</b> , , , , , , , , , , , , , , , , , ,   |
| 14. Ho                                 | w do the lines com                            | pare?  |   |                   |   |        |                                     |             |  |
| 14a                                    | . X ine 12b is les<br>Go to Part 3.           | ss than or equal to line 13. On the top  | of page 1, check box 1, There is                    | s no presumptio   | n of abuse.   |        |                                     |             |  |
| 146                                    | o. Line 12b is mo                             | ore than line 13. On the top of page 1, and fill out Form 122A-2.  | check box 2, The presumption                        | of abuse is dete  | rmined by Fo  | rm 1:  | 22A-2.                              |             |  |
| Part                                   | 3: Sign Below                                 |  |   |                   |   |        |                                     |             |  |
|  | By saning here                                | , I declare under perfaity of perjury tha  | at the information on this stateme                  | ent and in any at | tachments is t                                      | true a | and correct.                        |             |  |
|  |   | 202 / 202  | -   |                   |   |        |                                     |             |  |
| ************************************** |   | Oscar Vega   |   |                   |   |        |                                     |             |  |
|  | Date::  | 5,13 <sub>/2018</sub>  |   |                   |   |        |                                     |             |  |
|  | if you checked                                | line 14a, do NOT fill out or file Form 1   | 22A-2.  |                   |   |        |                                     |             |  |
|  | -   | line 14b, fill out Form 122A-2 and file  |   |                   |   |        |                                     |             |  |

Form B 201A, Notice to Consumer Debtor(s)

in re Oscar Vega / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 8 /13 /2018

Oscar Vegą

X Date & Sign

Dated: 5 / 3 /2018

Attorney: Alex Wilson

Record # 758861

Form B 201A, Notice to Consumer Debtor(s)

Page 2 of 2